

**PROGRAM NAME****Inspira Medical Center Vineland**1505 W. Sherman Ave.  
Box 93  
Vineland, NJ 08360**CASPR # 0640****CRIP** Unsure**DIRECTOR****Angelo A. Luzzi DPM**

Phone: 856-641-8661

Program E-mail: perezn@ihn.org

Program Web Site:

Rescue Fund Insured: Yes  
COTH Member thru 6/30: Yes**Entry Level Positions**

Type	# Approved	# Active
PMSR/RRA	3	3

**HOSPITAL DESCRIPTION**

**Accreditation:** JCAHO      **Has Clerkship Program:** yes

**# Staff DPMS:** 14

**Affiliated Institutions:** Inspira Health Network Woodbury Hospital, Rubin Institute for Advanced Orthopedics, Access Surgery center and Oak & Main surgery center,

**Other Residency Programs:** OB/GYN  
Family Medicine  
Orthopedic Surgery  
Traditional Rotating Internship  
Internal Medicine  
General Surgery  
Emergency Medicine  
Critical Care Fellowship  
Sports Medicine Fellowship  
Urogynecology Fellowship

**CLINICAL EXPERIENCES**

<b>Anesthesiology:</b> yes	<b>Internal Medicine:</b> yes	<b>Pathology/Lab:</b> yes	<b>Rehabilitation:</b> yes
<b>Behavioral Science:</b> yes	<b>Infectious Disease:</b> yes	<b>Pediatrics:</b> yes	<b>Rheumatology:</b> no
<b>Dermatology:</b> yes	<b>Neurology:</b> no	<b>Plastic Surgery:</b> no	<b>Surgery (General):</b> yes
<b>Diabetic Wound Care:</b> yes	<b>Orthopedics:</b> yes	<b>Podiatry:</b> yes	<b>Trauma:</b> yes
<b>Emergency Room:</b> yes	<b>Office Rotations:</b> yes	<b>Podiatry (Surgery):</b> yes	<b>Vascular Surgery:</b> yes
<b>Family Practice:</b> no	<b>Outpatient Clinic:</b> yes	<b>Radiology:</b> yes	

**Other Clinical Experiences:** none.**Program Emphasis:** none.**DIDACTIC PROGRAM**

<b>Grand Rounds:</b> no	<b>Research:</b> yes	<b>Book Club:</b> no
<b>Journal Club:</b> yes		<b>Lecture Series:</b> yes

**RESIDENT BENEFITS**

<b>Stipends:</b> PMSR/RRA: \$47,000/ \$49,000/ \$51,000	<b>CME Allowance:</b> yes	<b>Housing:</b> no	<b>Uniforms:</b> yes
	<b>Health Insurance:</b> yes	<b>Meals:</b> yes	<b>Vacation:</b> yes
	<b>Malpractice Insurance:</b> yes	<b>Sick Leave:</b> yes	

**Other Resident Benefits:** none.**APPLICANT REQUIREMENTS****Mail Additional Materials To:**1505 W. Sherman Ave.  
Box 93  
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<b>ACLS:</b> yes	<b>CPR:</b> yes	<b>Ltrs of Recommendation:</b> 2	<b>Clerkship Required:</b> no
<b>APMLE Pt III:</b> No	<b>State License 1st yr:</b> training		<b>Minimum GPA:</b> no
<b>Program Fee:</b> \$35.00	<b>Fee Refundable:</b> no		<b>Minimum Rank:</b> no
			<b>CV:</b> no

**Deadline:** 11/8/2017**Payable To:** Inspira Medical Center Inc.**Other Applicant Requirements:** \*Clerkship not required but recommended.**AVAILABLE RESOURCES****Sample Contract:** Contact Program      **Benefit Package:** Contact Program**Curriculum:** Contact Program**PROGRAM OVERVIEW**

Rotations at Rubin Institute for Advanced Orthopedics in Baltimore