

**PROGRAM NAME****St Michael's Medical Center**268 Dr. Martin Luther King Jr Blvd  
Newark, NJ 07102**CASPR # 0643****CRIP** No**DIRECTOR****Ann Marie Palagiano DPM**

Phone:

Program E-mail:

Program Web Site:

Rescue Fund Insured: No  
COTH Member thru 6/30: No**Entry Level Positions**

Type	# Approved	# Active
PMSR/RRA	1	1

**HOSPITAL DESCRIPTION**

**Accreditation:** JCAHO      **Has Clerkship Program:** yes  
**# Staff DPMS:** 15  
**Affiliated Institutions:** Prime healthcare  
**Other Residency Programs:** internal medicine

**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> yes
<b>Dermatology:</b> no	<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:** Resident on call to ER for all foot/ankle pathology**Program Emphasis:** none.**DIDACTIC PROGRAM**

<b>Grand Rounds:</b> yes	<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: \$47,866/ \$51,364/ \$54,650	<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:**Surgical Podiatry Assoc  
50 Union Avenue, Suite 106  
Irvington, NJ 07111

<b>ACLS:</b> no	<b>CPR:</b> no	<b>Ltrs of Recommendation:</b> none	<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> \$40.00	<b>Fee Refundable:</b> no		<b>Minimum Rank:</b> no
			<b>CV:</b> no

**Deadline:** 11/8/2017**Payable To:** Saint Michael's Medical Center**Other Applicant Requirements:** none.**AVAILABLE RESOURCES****Sample Contract:** Contact Program**Benefit Package:** Contact Program**Curriculum:** Contact Program**PROGRAM OVERVIEW**

We are a PMSR program with Rearfoot Accreditation