

PROGRAM NAME

Virtua Voorhees
 2225 Evesham Road
 Suite 101
 Voorhees, NJ 08043

CASPR # 0646
CRIP Section 1

DIRECTOR

John Girimonte DPM

Phone: 856-325-3718
 Program E-mail: jgirimonte@virtua.org; bthompson@virtua.org
 Program Web Site: www.virtua.org

Rescue Fund Insured: Yes
 COTH Member thru 6/30: Yes

Entry Level Positions

| Type | # Approved | # Active |
|----------|------------|----------|
| PMSR/RRA | 2 | 2 |

HOSPITAL DESCRIPTION

Accreditation: JCAHO **Has Clerkship Program:** yes
Staff DPMS: 42
Affiliated Institutions: none.
Other Residency Programs: Family Practice, Dentistry, Pharmacy

CLINICAL EXPERIENCES

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

Other Clinical Experiences: Reconstructive Foot and Ankle Orthopedic Rotation in 3rd year
Program Emphasis: Surgery and Wound Care

DIDACTIC PROGRAM

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|--------------------------|----------------------|----------------------------|
| Grand Rounds: yes | Research: yes | Book Club: yes |
| Journal Club: yes | | Lecture Series: yes |

RESIDENT BENEFITS

| | | | |
|---|-----------------------------------|------------------------|----------------------|
| Stipends: PMSR/RRA: \$53,290/ \$55,266/ \$56,597 | CME Allowance: yes | Housing: no | Uniforms: yes |
| | Health Insurance: yes | Meals: yes | Vacation: yes |
| | Malpractice Insurance: yes | Sick Leave: yes | |

Other Resident Benefits: See Program Overview regarding third year.

APPLICANT REQUIREMENTS

Mail Additional Materials To:

2301 Evesham Road
 Ste 307
 Voorhees, NJ 08043

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|----------------------------|---------------------------------------|----------------------------------|-------------------------------|
| ACLS: no | CPR: yes | Ltrs of Recommendation: 3 | Clerkship Required: no |
| APMLE Pt III: No | State License 1st yr: training | | Minimum GPA: no |
| Program Fee: \$0.00 | Fee Refundable: n/a | | Minimum Rank: no |
| | | | CV: no |

Deadline: 11/7/2018

Payable To: n/a

Other Applicant Requirements: none.

AVAILABLE RESOURCES

Sample Contract: Contact Program **Benefit Package:** Contact Program **Curriculum:** Contact Program

PROGRAM OVERVIEW

Visiting the program is highly recommended and you must have your own transportation.
 This program is a 3-year commitment.
 The curriculum takes 36 months to complete.