



MEDICAL CENTER

FAMILY MEDICINE RESIDENCY PROGRAM

Elective Request Form
Academic Year: 2022-2023

Resident Name:		Date of Request:	
Rotation	Supervising physician <i>If multiple physicians, circle preferred choice</i>	Length of rotation	Numerical rank <i>1 being most preferred</i>
CME: Do you plan on attending a course? Yes No	Date/course title:	1 week, must be chosen before start of academic year	
Allergy/Immunology	Dr. Amit Patel	2 weeks	
Community Medicine	Dr. Jose Ramos	2 weeks	
Endocrinology	Dr. Radha Reddy	2 weeks	
GI	Dr. Kenneth Lee <u>or</u> Nischita Merla	2 weeks	
Gynecology	Dr. Prabitha Desai	2 weeks	
Hem/Onc	Dr. Alaa Latif	2 weeks	
High risk OB	Dr. Elsharkawy/Dr. Rodriguez	2 weeks	
Nephrology	Dr. Abid Rizvi	2 weeks	
Neurology (In-patient)	Dr. Faizal Qazi	2 weeks	
NICU	Dr. Sun/Dr. Lim	2 weeks	
Ophthalmology	Dr. Mark Barak	2 weeks	
Palliative Care	Dr. Lisa Raptis <u>or</u> Dr. Timothy Dauwalder	2 weeks	
Podiatry	Dr. Shapiro	2 weeks	
Pulmonology	Drs. Sadana, Davis, Eltahir, Sinha	2 weeks	
Research	Dr. Jesse Cheung	2 weeks	
Trauma Surgery	Dr. Andrew Michael	2 weeks	
PGY 3 Rotations			
Urgent Care	Dr. Aboudi	2 weeks	
Dermatology <i>(PGY2 required rotation)</i>	Dr. Chris Harper	2 weeks	
Permissions Required			
Academic Medicine	Dr. Ramos/Meyers	2 weeks	
Integrative Medicine	Dr. Yen Lai	2 weeks	
MSK	Dr. Jeff Ijadi and/or Dr. Hanh Larson	2 weeks	
Other: 1. Rotation name: Must be pre-approved by Program Director	Required: 1. Supervising physician: 2. Goals/ objectives: Attach goals and objectives to this page. 3. Away elective: Yes No <i>(60 miles or more from PVHMC FMRP)</i>	Minimum of 2 weeks	

- PGY2 has an average of 2-6 weeks of electives - PGY3 has an average of 8-10 weeks of electives

** Application Needed for Academic Medicine, MSK and Integrative Medicine** Requires Permission

ELECTIVE NAME: _____

GOALS:

OBJECTIVES:

ROTATION SCHEDULE:

EVALUATION:

READINGS: