CLASS OF 2016
FOURTH YEAR ELECTIVES WORKSHOP

Dr. Kuhls / Dr. Baker
REQUIREMENTS

• Minimum 36 weeks of elective credit (1 week = 1 credit)

• 4 week required Rural Rotation (Jamie Anderson, Dir.)
RESTRICTIONS

• Maximum 12 weeks per sub-specialty (additional weeks may be taken, but must be added to the total 36; example: 16 weeks of orthopedic surgery requires a total of 40 weeks)

• Maximum 6 weeks of non-clinical electives

• Maximum 12 weeks out-of-state electives
Well Balanced Schedule

• Fourth year elective schedules submitted for approval must include a well rounded clinical experience.

• Clinical Career Advisors are available to help achieve this goal.

• Clinical Career Advisors and the Associate Dean for Medical Education reserve the right to deny approval of unbalanced or otherwise inappropriate schedules.
Planning/Process

ELECTIVES CATALOG

http://medicine.nevada.edu/ome/electives/catalog
RULES

• Any clerkship not taken in the third year must be completed by the end of September, 2015.
• ALL electives must be scheduled through the department assistants. DO NOT go directly to the preceptor!
• No more than 3 days may be missed per 4-week rotation; no more than 1 day may be missed of a 2-week rotation. These days are to be viewed as INSURANCE, NOT AN ENTITLEMENT.
• 2 week advance notice required for elective changes
• NO-SHOWING TO AN ELECTIVE WILL RESULT IN A FAIL ON YOUR TRANSCRIPT. DON’T DO IT!
STEP BY STEP SCHEDULING PROCESS

1. Choose a clinical career advisor from the advisor list.
2. Make a tentative schedule.
3. Review tentative schedule with your advisor.
4. Once you have your Rural Rotation assignment, revise tentative schedule, if necessary.
5. Schedule your electives with department assistants.
   **Note**: Department assistants will not schedule any electives until March 9, 2015. ONLY department assistants may approve electives. Their signatures must appear on your schedule for the elective to be officially approved.
6. Your clinical career advisor must sign your schedule.
7. **Elective Schedule Summary Form**: Email Chrissy McHardy (Office of Medical Education) cmchardy@medicine.nevada.edu your form by **May 15, 2015**. Include all required rotations and away rotations.
8. Two weeks in advance of each elective, contact department assistant to confirm participation and get information on where and when to report.
ELECTIVES CATALOG

http://medicine.nevada.edu/ome/electives/catalog
# Electives Catalog

Descriptions of electives appearing in this catalog were prepared by the faculty of the department offering the elective and by the Office of Medical Education. Any questions regarding descriptive material of a particular elective should be directed to the appropriate departmental elective coordinator.

<table>
<thead>
<tr>
<th>By Location -</th>
<th>By Department Code -</th>
<th>By Type -</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine (FMER)</td>
<td></td>
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<tr>
<td>Family and Community Medicine (FCM)</td>
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<tr>
<td>Internal Medicine (IMED)</td>
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<td>Medical Education (MED)</td>
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<td>Pharmacology (PHAR)</td>
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<tr>
<td>Surgery (SURG)</td>
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Non–Clinical Electives

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<tr>
<th>Unsom Non–Clinical Electives on Record as of January 20, 2015</th>
<th>Course Code</th>
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<th>Site</th>
<th>Non–Clinical Elective</th>
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<td>Internal Medicine</td>
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<td>Both</td>
<td>x</td>
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<tr>
<td>Health Care Issues of Sex Workers</td>
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<td>Individual Study or Research in Pediatrics-R</td>
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<td>x</td>
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<tr>
<td>Microsurgery and Hyperbaric Research-LV</td>
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<tr>
<td>Independent Study / Research in Surgery</td>
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FORMS

http://medicine.nevada.edu/ome/electives/students/forms

Office of Medical Education

Forms

- Elective Change Form [pdf]
- Elective Schedule Final Summary Form [xlsx]
- Elective Schedule Form [pdf]

Utilities

The following applications and applets may be used to open the files on this page.

- Adobe Acrobat Reader [pdf]
- Microsoft Excel Viewer [xls, xlsx]
The following schedule must be returned to the OFFICE OF MEDICAL EDUCATION **NO LATER THAN MAY 15, 2015**

Student's Name: ____________________________________________

Phone No: ( ) ______________ E-mail: __________________________ Pager or Cell: __________________________

<table>
<thead>
<tr>
<th>TIME PERIOD</th>
<th># of CREDITS</th>
<th>ELECTIVE TITLE</th>
<th>ELECTIVE LOCATION</th>
<th>DEPARTMENT CREDITS (36)</th>
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</thead>
<tbody>
<tr>
<td>(40 hrs = 1CR)</td>
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</tbody>
</table>

**EXAMPLE:**

FROM: 6-22-15  
(Starts on a Monday)

TO: 7-19-15  
(Posts on a Sunday)

ELECTIVE TITLE: PLASTIC SURGERY

COURSE NAME: SURG661MM

SECTION #: 01 (RENO)

**DEPARTMENT APPROVAL:**

Signature of Department Assistant

**Department Assistant**

FROM: ______  

TITLE: ________  

COURSE #: ________  

SECTION #: ________  

TO: ________  

FROM: ________  

TITLE: ________  

COURSE #: ________  

SECTION #: ________  

TO: ________  

FROM: ________  

TITLE: ________  

COURSE #: ________  

SECTION #: ________  

TO: ________  

FROM: ________  

TITLE: ________  

COURSE #: ________  

SECTION #: ________  

TO: ________  

Rev. 1/18/14
# Elective Schedule Summary

**Last Name, First Name**

**Career Advisor:**

**Phone:**

**Email:**

## Graduation Requirements:
The curriculum for the fourth year is comprised of a minimum of 36 weeks of scheduled elective experiences. Of those 36 weeks, four weeks will be used to complete the required Advanced Clinical Experience in Rural Healthcare rotation. No more than 12 of the required 36 weeks may be taken in any one sub-specialty. No more than six of the required 36 weeks may be taken in non-clinical electives. A maximum of 12 weeks may be taken at out-of-state locations.

### UNSOM Electives

<table>
<thead>
<tr>
<th>Semester/Longitudinal</th>
<th>Elective Start Date/Year</th>
<th>Elective End Date</th>
<th>Dept.</th>
<th>Course Code - Abbreviation - Location</th>
<th>In-State Credits</th>
<th>Rural Credits</th>
<th>Clinical Credits</th>
<th>Non-Clinical Credits</th>
<th>Initials</th>
<th>Assit.</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

### Away Electives

<table>
<thead>
<tr>
<th>Discipline and name of school entered below.</th>
<th>Away Credits</th>
<th>Clinical Credits</th>
<th>Non-Clinical Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Away Electives: Please forward school/locaton, course information and dates to cmchardy@medicine.nevada.edu. This may include a VSAS screenshot or confirmation letter from the school.

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**2015**

<table>
<thead>
<tr>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
</tr>
</thead>
</table>

**2016**

<table>
<thead>
<tr>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
</tr>
</thead>
</table>
Electives Schedule Summary Form – Instructions/online:
http://medicine.nevada.edu/ome/electives/students/forms

Enter Last name, First Name
Enter phone number
Enter UNSOM email address
Enter Career Advisor's name

Fall Electives
There is a calendar for your reference on the bottom of the first page and the top of the second page.

In-state and Rural Electives

• Start Month/Longitudinal - The month start needs to be chosen before the Elective Start Date.
• Select the Start Date from the dropdown menu. NOTE: All elective dates start on a Monday, whether that is the actual date you start.
• Select the End Month from the dropdown menu.
• Select the Elective End Date from the dropdown menu. NOTE: All elective end dates are a Sunday, whether you work the last weekend date, or not.
• Select the Department from the dropdown menu.
• Once a Department is selected you can select from the dropdown menu the courses associated with that department.
• Under In-State, Rural, Clinical or Non-clinical Credits you can select the number of credits/weeks associated with that course.
Longitudinal - only need to select Start date and Fall or Spring Semester. Select the Dept. and the course.

Your total credits will ‘self add’ in the totals boxes. The very top totals are a combination of the Fall and Spring semester.

If you want to change something, click in the cell, right click and select "clear contents."

Away Electives
- At the bottom select the dates you propose to be away for an elective, even though you probably won't have confirmation yet. Select start and end dates the same as previous instructions.
- You will type in the department and the name of the school in these cells, so we have some idea of where you are going.
- Enter the number of weeks/credits for these away electives.
- NOTE: You will forward the complete information when you get it from the school to cmchardy@medicine.nevada.edu

Spring Electives
- Complete as described previously.
- Your totals for spring will populate at the bottom of this page, as well as added to the totals for both semesters on the top of the first page.

Send ONLY the electronic version to cmchardy@medicine.nevada.edu. Do NOT send a hard copy.
SCHEDULE CHANGES

• Approval by the relevant department assistants and approval of the Office of Medical Education must be obtained by the student, using the Elective Change Form

• At no time may the student’s schedule contain less than the required 36 credits; any course dropped that takes the total below 36 must be turned in with an accompanying course addition.

• Students must be registered in advance for an elective if they are to receive credit; course changes must be approved and processed through the Office of Medical Education before the student begins the elective.

• A processing time of no less than two weeks is required for any elective change. Except in extenuating circumstances, failure to provide the required notice will result in a professionalism report being placed in the students record.

• Students who cancel an out-of-state elective must notify the department offering the elective, in writing. A copy of the letter must be forwarded to the Office of Medical Education, along with a completed Elective Change Form.

IMPORTANT: No schedule changes for FALL will be accepted after December 1, 2015 and for SPRING – February 1, 2016.
REQUEST TO CHANGE ELECTIVE ASSIGNMENT
(For all elective additions, drops and changes)

Please complete the entire form, making sure you accurately fill in all of the following: course title, course number and beginning and ending dates. Procure the necessary authorized signatures.

For out-of-state electives, you may submit a copy of the confirmation letter from the participating medical school in lieu of an approval signature. Fax or email confirmation letters to Christine McHardy, 775-784-6194, cmchardy@medicine.nevada.edu.

Name of Student

Date

Mailing Address

E-mail address

City, State

Zip Code

Telephone Number

Requesting Transfer or dropping an elective (If you are dropping only part of an elective, please be sure to state this on the form e.g. 8/12 – 8/23/14 – dropping first 2 weeks of 4 week urology rotation).

FROM:
Elective Title:
Course No. and Section:
Begin and End Dates:
# of Weeks (credits):

TO:
Elective Title:
Course No. and Section:
Begin and End Dates:
# of Weeks (credits):

INSTRUCTOR:

Reason for Request:

________________________

Student Signature:

APPROVALS:

Signature of Department Coordinator or Assistant FROM which transfer is desired.* Date

Signature of Department Coordinator or Assistant TO which transfer is desired.* Date

Signature of Associate Dean for Educational Affairs, Office of Medical Education Date

* All coordinator/assistant signatures must be obtained before submission to the Office of Medical Education for final approval.

Please contact the Christine McHardy at the Office of Medical Education (775) 682-7729 if you have questions.

Rev. 1/18/14

Schedule Change Form:

http://medicine.nevada.edu/ome/electives/students/forms

If you are dropping only a portion of an elective, please be sure to specify on this form
ELECTIVE EVALUATIONS AND FINAL GRADES

http://medicine.nevada.edu/ome/evaluations

Evaluations will be done through One45. Just like third year, but without the patient logs!

Evaluation and Assessment

The Office of Medical Education is responsible for implementing a comprehensive institutional assessment plan for the undergraduate medical education program. This plan includes evaluation of the curriculum for the M.D. degree program through data collection from our internal and external stakeholders. These efforts help us, as an institution, to monitor our progress in meeting the institutional objectives we have established for the University of Nevada School of Medicine and to inform decision-making for continuous quality improvement of our M.D. degree program.

Evaluation and Assessment Information

- **Students**: Evaluation and Assessment
- **Faculty**: Evaluation and Assessment
- **Institutional Assessment**: Evaluation and Assessment
- **Forms**: Evaluation and Assessment
- **Contact Evaluation and Assessment**
YOUR RESPONSIBILITIES

• **IMMUNIZATIONS** – It is your responsibility to make sure they are current.

• **HOSPITAL CREDENTIALING** – It is your responsibility to make sure you are prepared to enter a training site. All hospital required paperwork is available at [http://www.medicine.nevada.edu/dept/OME/AffiliationAgreementHospitalRequirements.asp](http://www.medicine.nevada.edu/dept/OME/AffiliationAgreementHospitalRequirements.asp). Or, contact Kevin Ray in Las Vegas (702-671-6457) or Christine McHardy in Reno (775-682-7729).

• **EVALUATIONS** – It is your responsibility to provide all out-of-state preceptors with a copy of the Clinical Performance Evaluation Form. No credit can be given without a completed evaluation form from the preceptor.

• **ADDRESS CHANGES/CONTACT INFO** – It is your responsibility to notify the Office of Admissions and Student Affairs of any changes. Contact Brandi Aiazzi at 775-682-8351.

• **AWAY ROTATIONS** – It is your responsibility to keep OME apprised about changes in away rotations. UNSOM’s medical malpractice does not cover you if your rotation has not been approved by OME. Confirmation letters (or screen shots of VSAS acceptances) should be forwarded to Christine McHardy at cmchardy@medicine.nevada.edu.
Applying to Away Electives

• Office of Student Affairs provides support and processes medical students’ applications for away electives.
• Students should consider away electives as part of their specialty application process.
• Research schools/electives now; wait to apply until after your rural rotation is scheduled.
• Check out the information online:
  http://www.medicine.nevada.edu/dept/asa/students/ApplyingForOutOfStateElectives.htm
  https://www.aamc.org/students/medstudents/vsas/

Contacts: Brandi Aiazzi, Reno Campus; Stephanie Mathews, Las Vegas Campus
RURAL PRESENTATION

JAMIE ANDERSON
Rural Director
Med 608
Advanced Clinical Experience in Rural Health Care

Rural Rotation Director
Jamie T Anderson, MS,MA
PMB 208B
(775)682-7728
jtanderson@medicine.nevada.edu
ORIENTATION

• This is it!!!!

• Clerkship Goals:
  - Mini Internship
  - Increase understanding of health care dynamics in smaller communities

• Methodology:
  - Immersion Experience
  - Preceptorship Format
Sample Planning Form
Student Planning Responsibilities

• Review email communication re: clerkship
• Complete Preference Form by **5:00PM February 27, 2015**.
• Use ID # ONLY
• Comment section: Use to describe interests, preferences, information helpful to clerkship coordinator in scheduling.
• ID, MT, Alaska Students: See Jamie Anderson re: return to home state for rural rotation
• Email completed form to npreston@medicine.nevada.edu
Assignments

• Roster of class assignments emailed to each student by 5:00PM March 2, 2015.
• All correspondence will be sent via medicine account.
• Students should be prepared for possibility that their preference of preceptor/location may not be available.
• Monday, March 9, 2015: Elective Planning Process begins.
Changes in Rural Rotation Assignments

• March 2- April 30, 2015
• Students have this time block to make trades with other students if they so desire.
• Trades must reflect exact preceptor, location and date.
• Clerkship Change Form must be completed:
  - Must be signed by both students
  - No changes will be processed without both signatures.
  - First come, first served in change process.
  - Completed forms turned in to Jamie Anderson.
• Updated roster will be available upon written request.
Assignment Changes after April 30, 2015

In Case of:

• Conflict with out of state elective in specialty choice
• Conflict with residency interviews that may exceed the 3 day excused absence policy
• Unexpected and serious personal/family situation
• *** Student should be prepared for the possibility that their preference of preceptor, location, date may not be available.
• Students requesting changes after April 30 are encouraged to contact Jamie Anderson directly to discuss options.
• Written request to change assignment is mandatory.
• No changes processed without written request.
• When change is processed, written notification is sent to student and affected preceptors and hospital/community partners.
Key Information for Students

Six weeks prior to the start of the rotation:
Students will receive an email confirming their assignment and directing them to WebCampus for their course related materials. This includes:
- Contact information of preceptor
- Hospital documentation requirements (student responsibility)
- Housing resources (if available)
- Community information

Three weeks prior to the start of the rotation:
- Completed Confirmation of Housing form must be returned to Nicole Preston (npreston@medicine.nevada.edu)
- Hospital documentation requirements – submit directly to contact person indicated in WebCampus

Two weeks prior to start of the rotation:
Reminder letter along with Evaluation of Student Performance and student contact information is sent to preceptor

First week of the rotation:
Completed Learning Contract due. Submit to Nicole Preston

Four weeks after the rotation:
Completed paperwork due. Submit to Nicole Preston
- Honors Project (optional)
- Student must complete Course & Teaching Evaluations in one45
- Preceptor returns completed Evaluation of Student Performance
- Final grade submitted to Registrar
Sample: Web Campus
Other Helpful Information

• Absences: Notify Nicole of dates and make up dates, if applicable, in writing
• Visibility: High
• Pets: **NO, NO, NO!!!**

This is a partnership!
Enjoy the opportunity!
Graduate!
Year 4 & Specialty Choice Advisory Workshops

Deborah Kuhls, MD
Cherie Singer, Ph.D.
Ann Diggins
Timeline
January – June 30, 2015

• Continue to do well in your clerkships.
• Attend Career Advising Workshops for your specialty areas of interest.
• Talk with and begin to identify career advisor for your specialty area(s).
• Narrow down specialty choices to maximum of 2 by April/May.
• Talk with Student Affairs for help with decision-making, unique circumstances (couples match, etc.); determining competitiveness.
• April – ERAS Workshop – applying to residency – Date To Be Determined
Advising Workshops

1. One-Stop Advising for Students
2. Academic and Career Advising
3. Advisor selection
4. Overview of workshop goals:
   - Making your specialty choice
   - Assessing your “fit” for specialty interests
   - Choosing clinical electives to help you in your specialty choice and preparation
   - Selecting clinical electives to completed your medical education
   - How to prepare for residency
   - Strategies for residency program applications.
   - Timing for Step 2 CK and CS
   - MATCH!
   - Graduation!
   - Class of 2016 advising workshop schedule online by Friday, January 24; in Student News Monday, Jan. 27
Most Competitive Specialties

Top 5 (2014 Match)

• Neurosurgery
• Otolaryngology
• Plastic Surgery
• Orthopaedic Surgery
• Physical Medicine and Rehabilitation

Specialties becoming more competitive

• Emergency Medicine
• Pediatrics
• Neurology
• Radiation Oncology
• General Surgery
Successful Match Strategies

• Accurately assess competiveness for your specialty interests
• Talk and listen to Student Affairs
• Talk and listen to clinical advisors
• Strong clerkship grades lead to strong letters of recommendation
• Prepare for Step 2 CK – score needs to stay the same or go up
**“Fit” for Specialty Interests**

Handout – electronic version to students

**Student Self-Assessment**

*This self-assessment must be completed prior to attendance at the Advising Workshop. Please bring it with you to the workshop.*

Name:

Specialty Preference (s) ____________________________________  _____________________________________

*You are not required to have more than one specialty choice. Use these as needed.

<table>
<thead>
<tr>
<th>Student Self Assessment Considerations</th>
<th>Specialty Choice 1:</th>
<th>Specialty Choice 2*</th>
<th>Specialty Choice 3*</th>
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<tr>
<td>List the primary reason for your choice of this specialty</td>
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<td>Patient Type Preference</td>
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<tr>
<td>• Gender</td>
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<tr>
<td>• Age</td>
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<tr>
<td>• Other</td>
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<tr>
<td>Lifestyle considerations important to you</td>
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<tr>
<td>Financial considerations</td>
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<tr>
<td>What part of medicine are you giving up by choosing this specialty?</td>
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<tr>
<td>Geographic Considerations</td>
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<tr>
<td>Fellowships available in this specialty</td>
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<tr>
<td>Research opportunities</td>
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</table>
Resources for Students

- UNSOM Outcomes of the Match
- National Outcomes of the Match (NRMP)
- Careers in Medicine website
- Curriculum for Year 4 (electives catalog)
- Student Affairs
- Administrative Faculty in Academic Affairs, Medical Education
- Clinical Advisors
MEDICAL SPECIALTY ADVISEMENT:  
Family Medicine

**Match Process:** ERAS/NRMP

**Fellowships:**
- Geriatrics
- Sports Med
- Obstetrics
- Urgent Care

**Options:**
- Categorical (3 Years)

**UNSOM Programs:**

**Reno:**
(6 Spaces)
David Fiore, M.D., Program Director
[http://www.medicine.nevada.edu/residency/reno/familymedicine/](http://www.medicine.nevada.edu/residency/reno/familymedicine/)

**Las Vegas:**
(5 spaces)
Kate Martin, MD, Program Director
Winnemucca, Nevada
Aron Rogers, D.O., Program Director
(2 spaces; 1 year in Las Vegas; 2 years in Winnemucca)

<table>
<thead>
<tr>
<th>Location</th>
<th>Name</th>
<th>Email Address</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Las Vegas</td>
<td>Tom Hunt, M.D.</td>
<td><a href="mailto:thunt@medicine.nevada.edu">thunt@medicine.nevada.edu</a></td>
<td>(702) 992-6875</td>
</tr>
<tr>
<td></td>
<td>Kate Martin, M.D.</td>
<td><a href="mailto:kmartin@medicine.nevada.edu">kmartin@medicine.nevada.edu</a></td>
<td>(702) 992-6875</td>
</tr>
<tr>
<td></td>
<td>Laura Shaw, M.D.</td>
<td><a href="mailto:laurashaw@medicine.nevada.edu">laurashaw@medicine.nevada.edu</a></td>
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</tr>
<tr>
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<td>Marcia Lu, M.D.</td>
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</tr>
<tr>
<td></td>
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<td><a href="mailto:dspogen@medicine.nevada.edu">dspogen@medicine.nevada.edu</a></td>
<td>775-682-8624</td>
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**UNSOM Grads:**
- 2014: 9
- 2013: 7
- 2012: 6

**UNSOM & U.S. OUTCOMES OF THE MATCH**

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<td><strong>Year I-II GPA</strong></td>
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Family Medicine 3/30/2015
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<tr>
<th>Class Year/Name:</th>
<th>Prelim/Program:</th>
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<tr>
<td>2014</td>
<td></td>
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<tr>
<td>Jonathan Brown</td>
<td>UNSOM—LV</td>
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</tr>
<tr>
<td>Katelyn Bruner</td>
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<td></td>
</tr>
<tr>
<td>Brandon Hockenberry</td>
<td>St. Francis Hospital Center</td>
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</tr>
<tr>
<td>Scott Isbell</td>
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<tr>
<td>Timothy Musick</td>
<td>St. Francis Hospital Center</td>
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<tr>
<td>Justin Perry</td>
<td>University of Montana-Missoula</td>
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<tr>
<td>Samaan Sattarzadeh</td>
<td>UNSOM—LV/Rural</td>
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<td></td>
</tr>
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<td>Sarah Woydziak</td>
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<tr>
<td>Meilong (Jack) Yang</td>
<td>UNSOM—LV</td>
<td></td>
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<tr>
<td>2013</td>
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<tr>
<td>Katrina Mercado (Cabraddilla)</td>
<td>UNSOM—LV</td>
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<td>David Kuykendall</td>
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<tr>
<td>Everett Riley</td>
<td>Montana Family Medicine</td>
<td>N/A</td>
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</tr>
<tr>
<td>William (Alex) Stevens</td>
<td>Madigan Army Med. Ctr</td>
<td><a href="mailto:William.alex.stevens@gmail.com">William.alex.stevens@gmail.com</a></td>
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<tr>
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<td>2012</td>
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<tr>
<td>Jessica Farrar</td>
<td>UNSOM—Reno</td>
<td><a href="mailto:farrarjess@gmail.com">farrarjess@gmail.com</a></td>
<td></td>
</tr>
<tr>
<td>Kylee Finn</td>
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<tr>
<td>Christopher McDonnell</td>
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<td></td>
</tr>
<tr>
<td>Alysa Sutko</td>
<td>Univ. of Washington</td>
<td><a href="mailto:asutko@gmail.com">asutko@gmail.com</a></td>
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<tr>
<td>Mark Williams</td>
<td>Alaska Family Medicine</td>
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<td></td>
<td>Providence Hospital</td>
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<tr>
<td>Kelsey Worthington</td>
<td>UNSOM - Reno</td>
<td><a href="mailto:worthkd@gmail.com">worthkd@gmail.com</a></td>
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### UNSOM Residency Application Strategies (2012 Data)

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<td># of Interviews Invited to:</td>
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<tr>
<td># of Interviews Completed:</td>
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<tr>
<td># of Programs Ranked:</td>
<td>Mean – 4</td>
<td>Range – N/A</td>
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</table>
Questions?

Please Note: Power Point will be emailed to all students and will also be available online

Christine McHardy
Clerkship & Electives Coordinator
Ph. 775-682-7729

cmchardy@medicine.nevada.edu

Electives Planning Guide online link:
http://medicine.nevada.edu/ome/electives/students/forms