

**PROGRAM NAME****Bryn Mawr Hospital**

130 South Bryn Mawr Avenue  
c/o GME Office, 3rd Fl, H Wing  
Bryn Mawr, PA 19010

**CASPR #****0704****CRIP**

No

**DIRECTOR****David A. Bernstein DPM**

Phone: 610-688-1682

Program E-mail: dberns5839@aol.com

Program Web Site: <http://www.mainlinehealth.org/oth/Page.asp?PageID=OTH002500>

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

**Entry Level Positions**

Type	# Approved	# Funded
PM&S-36:	2	2

**HOSPITAL DESCRIPTION**

**Accreditation:** JCAHO  
**# Staff DPMS:** 20  
**Affiliated Institutions:** Community Volunteers in Medicine  
Eastern University Sports Medicine  
Paoli Surgery Center

**Other Residency Programs:** Family Practice, Radiology, Rotating Orthopedics and General Surgery**CLINICAL EXPERIENCES**

<b>Anesthesiology:</b> yes	<b>Internal Medicine:</b> yes	<b>Pathology/Lab:</b> yes	<b>Rehabilitation:</b> no
<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> yes	<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> yes	<b>Outpatient Clinic:</b> yes	<b>Radiology:</b> yes	

**Other Clinical Experiences:** Pediatric Orthopedic Surgery**Program Emphasis:** Podiatric Foot and Ankle Surgery, Wound Care, Sports Medicine, Pathology, Infectious Disease, Office Podiatry**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>	<b>CME Allowance:</b> yes	<b>Housing:</b> no	<b>Uniforms:</b> yes
PM&S-36: \$49,526/ \$50,627/ \$51,726	<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:** On Call Room For Podiatry**APPLICANT REQUIREMENTS**

<b>Mail Additional Materials To:</b> _____	<b>ACLS:</b> yes	<b>CPR:</b> yes	<b>Ltrs of Recommendation:</b> 3	<b>Clerkship Required:</b> no
130 South Bryn Mawr Avenue	<b>APMLE Pt III:</b> Yes		<b>State License 1st yr:</b> full	<b>Minimum GPA:</b> no
c/o GME Office, 3rd Fl, H Wing	<b>Program Fee:</b> \$0.00		<b>Citizenship Required:</b> yes	<b>Minimum Rank:</b> no
Bryn Mawr, PA 19010	<b>Refundable:</b> n/a		<b>Visa Info:</b> No Response	
<b>Deadline:</b> 11/15/2011	<b>Payable To:</b> n/a			

**Other Applicant Requirements:** Must visit hospital.**AVAILABLE RESOURCES****Sample Contract:** Internet Site**Benefit Package:** Internet Site**Curriculum:** Internet Site**PROGRAM OVERVIEW**

Hard work, long hours - great training in all areas of Podiatry especially surgery. We have a very busy wound care clinic at the hospital. Beautiful suburban location. WE WILL NOT BE PARTICIPATING IN CRIP DUE TO THE EXPENSE OF TRAVEL. Certified PM&S-36 with two residents taken each year.