

**PROGRAM NAME** Jamaica Hospital Medical Center8900 Van Wyck Expwy  
Jamaica, NY 11418**CASPR #** 0812**CRIP** Unsure**DIRECTOR** Steven Mehl DPM

Phone: 718-206-6712

Program E-mail: stevenmehldpm@gmail.com

Program Web Site:

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:** Hosp for Joint Disease, NY Hosp/Cornell Med Center  
**Other Residency Programs:** Family Practice, Dentistry, Internal Medicine, Pyschiatry, OB/GYN, Surgery

**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> no
<b>Dermatology:</b> no	<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:** Podo-Geriatrics**Program Emphasis:** YR1 concentration on podiatric and non-podiatric rotations. YR2 concentration on forefoot surgery. YR3 concentration on Rearfoot and Ankle Surgery**DIDACTIC PROGRAM**

<b>Grand Rounds:</b> yes	<b>Research:</b> no	<b>Book Club:</b> yes
<b>Journal Club:</b> yes		<b>Lecture Series:</b> yes

**RESIDENT BENEFITS**

<b>Stipends:</b>	<b>CME Allowance:</b> no	<b>Housing:</b> no	<b>Uniforms:</b> yes
PM&S-36: \$54,787/ \$59,491/ \$65,366	<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:**8900 Van Wyck Expwy  
Jamaica, NY 11418**Passage of NBPME:**  
Pt I: Yes Pt II: Yes Pt III: No**Program Fee:** \$0.00**Refundable:** n/a**Payable To:** n/a**Ltrs of Recommendation:** 2**Citizenship Required:** no  
(see overview for more detail)**State License 1st yr:** training**ACLS:** no **CPR:** no**Clerkship Required:** no**Minimum GPA:** no**Minimum Rank:** no**Deadline:** 11/15/2010**Other Applicant Requirements:** none.**AVAILABLE RESOURCES****Sample Contract:** Contact Program**Benefit Package:** Contact Program**Curriculum:** Contact Program**PROGRAM OVERVIEW**

We would best describe our program as being very well rounded. The program was recently reclassified as a PM&S 36. The first year the residents rotate through a myriad of Podiatric and Non-Podiatric rotations. They are highly exposed to diabetic wound care, geriatric care, community based out patient foot care and inpatient hospital care. Our second year they gain valuable forefoot surgical experience. The third year will concentrate on rearfoot and ankle surgery. We have been averaging 500-600 podiatric surgical cases/year. The residents participate in plastic, vascular, and general surgery as well. Our graduating residents are well trained and confident in their knowledge and experience to go out and practice fine podiatric medicine and surgery.