



University of Florida
Jacksonville
Anesthesiology
Residency
Program



MEET THE TEAM



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Service



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ABOUT US

16 Residency Positions: 4 per class





Small tight knit group

4 Year Categorical Program



Due to the integrated nature of our clinical base year, you must complete all 4 years, even if transferring from a different specialty or if you've completed a transitional year

We Consider MD/DO/IMG



We accept either USMLE or COMLEX. Must have passed on 1 attempt. Must complete 3rd exam prior to start of PGY2 year. Must have ECFMG certification to apply. We can sponsor J1-visas, no H1B visa.

CLINICAL LOCATIONS

UF Health Medical Center: UF Main Campus and UF North Campus

UF Main Campus

- Main OR
 - 15 Operating rooms
- OB (high risk center)
 - 3 Operating rooms
 - 15 L&D rooms
- OSC (Outpatient Surgical Center)
 - 2 Operating Rooms
 - 2 GI suites
 - Eye Clinic
- SICU/Trauma/CT-ICU 30+ Beds
- Pain Clinic
- Multiple Out-of-OR sites: CT, MRI, Interventional Rad





UF North Campus

- Low risk OB
- Elective neurosurgical cases
- Practice management rotation

CLINICAL LOCATIONS

Additional Sites: UF Proton Therapy, Mayo Clinic, Wolfsons Childrens

- UF Proton Therapy
 - Pediatric oncology experience
- Mayo Clinic
 - Advance neuro and transplant rotations
 - ICU (option for PGY4 rotation)
 - Optional advanced cardiac & pain-rehab rotations
- Wolfsons Children's Hospital
 - Wide variety of pediatric procedures including hearts, cranis, pediatric pain, and more
 - 3 1-month rotations



INTEGRATED INTERN YEAR – START ANESTHESIA TRAINING NW≄FEBRUARY OF PGY1

- Internal Medicine (2)
- General Surgery
- Trauma Surgery
- ICU
- Pulmonary Consults
- Cardiology Consults
- Inpatient Chronic Pain
- Anesthesia Orientation (2)
 - Paired with senior residents
 - Daily lectures
- General Anesthesia (2)
- Regional Anesthesia (1)

- Transfusion Medicine (2 weeks)
- OMFS Wards/Clinics
- General Anesthesia
- SICU
- Acute Pain Service
- Obstetric Anesthesia
- Proton (2 weeks)
- Introduction to Subspecialties
- PGY3
 - Medical ICU
 - Emergency Medicine (Resuscitation Bay)

ROTATION





A lot
8 weeks
Up to 16 weeks
30-32 weeks
8 weeks
2 weeks
12 weeks
2 weeks
8 weeks
3 weeks
14 weeks
8 weeks
16 weeks
4 weeks
4 weeks
2 weeks

CALL REQUIREMENTS

- Outside Rotations: As per service
 - IM Wards late calls, no overnights
 - Surgery, SICU night float system that you participate in
 - MICU Q4
 - Peds --variable
- Anesthesia
 - Night float system
 - Weekends days are off
 - Call starts after 5 months of anesthesia training
 - Sat Thurs 7pm 7 am
 - Average of 3-4 weeks per year
 - Friday 24 hour call
 - Average of 3-4 shifts per year



NIGHT FLOAT DUTIES

Graduated Responsibilities Based on Level of Training

- PGY- 1/2 primary provider for all emergency and trauma cases, manages pain service.
 - Goal of this rotation is to provide primary experience in the management of trauma and emergency cases
- PGY-3 provides OB coverage and acute pain coverage enhancing skills in triage, communication and systems-based practice.
 - Goal is to provide experience in the management of multiple patients and resources.
- PGY-4 triages cases, makes decisions on anesthesia cases and manages the anesthesia team during emergency, trauma, and complex cases.
 - Goal is to provide the junior attending role; where team management, systems-based practice and communication skills are demonstrated.

OTHER TRAINEES

- Medical Students
 - UF and auditioning students, paired with anesthesia residents
- OMFS Residents
 - 6 months, anesthesia orientation and then general anesthesia
- Mayo Anesthesia Residents
 - 2 months OB anesthesia, Trauma elective
- Non-Anesthesia Residents
 - Paired with CRNA/CAAs
- Student NA/AA
 - Paired with CRNA/CAAs
 - sAAs on OB
 - Occasional interaction with sRNAs when night AIC





PERKS AND BENEFITS

Free health insurance and covered parking

Vacation, sick, and conference time



Dental and vision are extra

Total time away from training still depended on ABA requirements

Extra monetary benefits



Yearly meal stipend ~\$1800

Academic allowance \$1500 (PGY1) \$2250 (PGY2,3,4)

ITE yearly performance bonus

Internal moonlighting allowed

Dedicated didactic time



Dedicated education day each Wednesday with didactics in the mornings and protected wellness/personal time in the afternoons

DIDACTIC PROGRAM

Year long curriculum utilizing Morgan and Mikhail

- 7-8 am Grand Rounds
- 830-930 Board Prep
 - Rotates between resident driven keyword review, group written exam, and group mock oral exam
- 930-1130
 - Two 1- hour learning sessions/lectures
- 1130-1230
 - Rotates between QI/EBM/POCUS
- Town Halls every 2 months
- Half Day Workshops: Airway management, thoracic boot camp
 - practice management, principles of ultrasound, etc.



SIMULATION (MAYO SIM

One Wednesday Afternoon a Month

- Full APPLIED Exam Simulation
- Teambuilding/Communication
- Crisis Management
- Case based Scenarios:
 - Pediatrics
 - OB
 - Neuro
 - Cardiac
 - Trauma/ICU
 - Regional







QUALITY IMPROVEMENT PATIE SAFETY SERIES



PGY1

- Orientation: Introduction to types of errors, just culture, patient safety communications, adverse event reporting, and wellness resources
- Didactic and Simulation: An in-depth two-hour small-group training covering the fundamentals
 of patient safety in a multi-specialty, interprofessional setting

• PGY 2

- Completion of IHI Basic Certificate +3
- Mock RCA Workshop
- Lead an RCA systems review of a quality issue and present at QI grand rounds

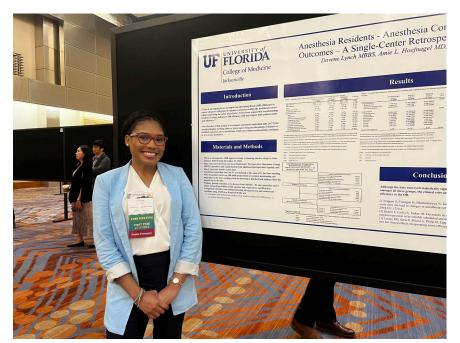
PGY3

- Completion of Lean 6-Sigma Yellow Belt certification with project
- Wrap-Up: event with risk-management staff designed to review prior curriculum. Ends with a simulated error-room

RESEARCH AND EVIDENCED BASED

Mathy August Town To Tanalyze literature

- Opportunities to be involved in research
 - Case reports, retrospective reviews
- National Presentations
 - Most residents present at least once at a national or international meeting







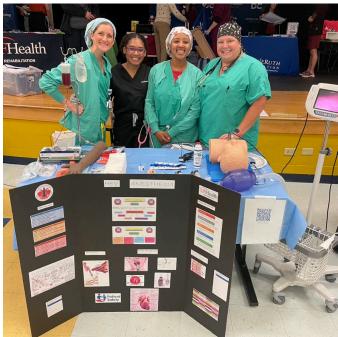
MENTORSHIP

- For trainees:
- Formal
 - Chosen by resident
 - Develop a study plan
 - Quartey check in meetings
- Informal
 - For special projects
 - Career planning
- Lunch with the Chair
 - Monthly

- By trainees:
- Medical students
- Junior residents
- Community outreach



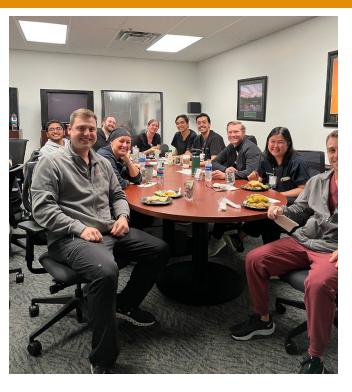




FEEDBACK

- Feedback of trainees:
- Daily
 - Verbal and written (myTipReport)
- Rotation based
 - Written summative evaluation
- Semi-Annual with PD
 - Written formative evaluation
 - Review progress on milestones
 - Set goals for upcoming 6 months

- Feedback <u>by</u> trainees:
- Yearly ACGME in internal survey
- Yearly rotation evaluations
- Faculty evaluations
 - Done 3x per year, data aggregated and sent to faculty yearly to ensure anonymity
- Town Halls
 - Every 2 months
- Lunch with the Chair
 - Monthly



OUTCOMES

- First time board pass rate last 3 years
 - Basic 95%
 - Advanced 86%
 - Applied 86%

100% achieved board certification from

201



- Where do residents go after graduation?
- 2023 Grads:
 - Pain Fellowship (3)
 - Private Practice (2)
- 2022 Grads:
 - Cardiac fellowship
 - Regional fellowship
 - Academic practice (UF Jax)
 - Private practice (2)
- 2021 Grads:
 - Pain fellowship (returned to UF Jax)
 - Academic practice
 - Private practice (3)

WHY TRAIN AT UF JACKSONVI

- Only level 1 Trauma Center in the region
- Safety Net Hospital
- Advantages of Smaller Program
- Experts in Quality Improvement & Patient Safety
- Extensive Regional Anesthesia Experience
- Leaders in Academics and Private Practice
- Jacksonville has something for everyone. Water, hiking, sports, the
- International airport
- We have a lot of fun in and out of the hospital





APPLICATION INFORMATION

- ERAS Application must be received by October 8th
- Invites will go out October 16-20
 - We only send out interview invites for actual open spots
- Interview dates are October 25 through January 10
- We will be looking heavily at program and geographical signals







QUESTIONS

