Cedars Sinai Medical Center **PROGRAM NAME**

8700 Beverly Blvd

Department of Surgery, Room 8215 North Tower

Los Angeles, CA 90048

DIRECTOR B. David . Massaband DPM, FACFAS

Phone 310-657-2828

Program E-Mail bmassaband@gmail.com

Program Web Site See Program Overview

Entry Level Positions

Rescue Fund Insured: Yes

COTH Member thru 6/30: Yes

CASPR # 0102

CRIP Section 2

Type # Approved

Funded

PMSR/RRA 2 2

HOSPITAL DESCRIPTION

Accreditation: **JCAHO** Has Clerkship Yes

Staff DPMs: 33

Affiliated Institutions: Local Surgical Centers (multiple) and

outside affiliation agreements with Amputation Prevention Center at USC Keck and Kaiser Permanente.

Other Residency Programs: Multiple within hospital, including medicine, path, radiology, gen surgery, ortho surgery, peds, anesthesia, psych, ER,

and more.

CLINICAL EXPERIENCES

ves Internal Medicine: yes Pathology/Lab: yes Rehabilitation: Anesthesiology: Behavioral Science: yes yes Infectious Disease: yes Pediatrics: yes Rheumatology: yes Neurology: Dermatology: Plastic Surgery: yes yes yes Surgery yes Diabetic Wound Care: yes Orthopedics: yes Podiatry: yes Trauma: yes Emergency Room: Family Practice: Office Rotations: Podiatry (Surgery): yes yes yes Vascular Surgery: yes **Outpatient Clinic:** Radiology: no yes yes

Other Clinical Experiences: Limb salvage.

Program Emphasis: Surgery, Trauma, in-patient, Diabetic limb salvage and wound care.

DIDACTIC PROGRAM

Journal Club: yes Grand Rounds: yes Research:yes Lecture Series:yes Book Club: yes

RESIDENT BENEFITS

Stipends: CME Allowance: Housing: Uniforms: yes yes yes

First Year: \$64362 Health Insurance: Meals: Vacation: yes yes yes Second Year

\$66495 Malpractice Insurance: yes Sick Leave: yes

\$69107 Third Year: Fourth Year: \$0

Housing stipend of \$10,000 per year, per resident. Other Resident Benefits: Medical license, DEA and USMLE reimbursement.

APPLICANT REQUIREMENTS

NBPME: Passage by July 1 Mail Additional Materials to:

Pt III: Yes Clerkship Required: Program Fee: \$0

Minimum GPA: 3.0 training State Licensure 1st Yr:

no

yes

yes

ACLS:

CPR:

Minimum Rank: no

Refundable: n/a

Payable To: n/a

Other Applicant Requirements: CV

ANGELES, CA 90048

8631 W 3RD ST STE 940E, LOS

Encouraged to participate in 4th year externship at our hospital.

Encouraged to visit program.

AVAILABLE RESOURCES Sample Contract: Contact Program Benefit Package: Contact Program Curriculum: Contact Program

PROGRAM OVERVIEW See web page:

https://www.cedars-sinai.edu/Education/Graduate-Medical-Education/Residency-Programs/Podiatry/