WELCOME TO THE UNIVERSITY OF SOUTH FLORIDA
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY

This manual contains information which you will find useful as you become familiar with the Department, its multifaceted mission, and your role as a resident. It can serve as a valuable reference tool for questions on departmental residency policy. The Department of Pathology and Cell Biology at USF has several primary objectives. These include:

1) Teaching of:
   a. Medical students
   b. Graduate students

2) Training of:
   a. Residents
   b. Pathology fellows
   c. Postdoctoral research fellows

3) Patient care
   a. Medical Clinics
   b. Morsani Center for Advanced Health Care
   c. Affiliated hospitals

4) Research
   a. Basic
   b. Translational

MISSION STATEMENT:

The mission of the Residency Training Program is to prepare physicians for a career in either academic or community pathology. Successful completion of this mission is a complex task requiring an intensive 4-year effort on the part of both faculty and individual residents. The Department's approach to this mission involves a combination of several active and passive modalities including:

1) Participation in patient service with progressive supervised responsibility
2) Attendance at didactic conferences
3) Presentation and participation in interactive conferences
4) Independent study
5) Teaching medical students and residents
6) Participation in hospital committees and national pathology organizations
7) Completion and presentation of a supervised research project

Through these activities, which are described in detail throughout this manual, each resident who successfully completes the program will acquire the knowledge base, skills, and judgment to competently practice pathology. Every resident will complete an identical "core" curriculum providing a basic foundation for the practice of pathology. Through protected elective time and individual incentive it is hoped that each resident will tailor his or her training toward academic or
community practice with a particular subspecialty or individual interest in mind.

Again, welcome to the Department of Pathology and Cell Biology. If you have any problems or suggestions as to how the Residency Training Program can better achieve its mission please feel free to contact:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Start Date</th>
<th>End Date</th>
<th>Phone Number</th>
<th>Pager Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Justin Wagoner</td>
<td>Chief Resident</td>
<td>07/01/08</td>
<td>10/31/08</td>
<td>USF 974-0535</td>
<td>332-6122</td>
</tr>
<tr>
<td>Dr. Chetna Purohit</td>
<td>Chief Resident</td>
<td>11/01/08</td>
<td>02/28/09</td>
<td>USF 974-0535</td>
<td>332-6824</td>
</tr>
<tr>
<td>Dr. Rahel Mathew</td>
<td>Chief Resident</td>
<td>03/01/09</td>
<td>06/30/09</td>
<td>USF 974-0535</td>
<td>332-6875</td>
</tr>
<tr>
<td>Dr. Santo Nicosia</td>
<td>Chairman and Program Director</td>
<td></td>
<td></td>
<td>USF 974-0529</td>
<td>256-4765</td>
</tr>
<tr>
<td>Dr. Jamie Shutter</td>
<td>Associate Program Director</td>
<td></td>
<td></td>
<td>USF 974-0535</td>
<td></td>
</tr>
<tr>
<td>Ms. Sylvia Beacham</td>
<td>Secretary</td>
<td></td>
<td></td>
<td>USF 974-0535</td>
<td></td>
</tr>
<tr>
<td>Ms. Christine Currier</td>
<td>Administrative Secretary to Chairman</td>
<td></td>
<td></td>
<td>USF 974-2745</td>
<td></td>
</tr>
</tbody>
</table>
ELISE ARBEFEVILLE, M.D.

PGY-5 – (Forensic Pathology Fellow) – Dr. Arbefeville received a Bachelor of Science degree Lycee Polyvalent, Mirepoix, Ariege, France. She received her M. D. degree from the St. George’s University School of Medicine in Grenada, West Indies. She her Residency was completed at the Stony Brook University Hospital, Stony Brook, NY.

WILLIAM BULKELEY, M.D.

PGY-1 – Dr. Bulkeley received a B.S. in Pre-Veterinary Science from the Clemson University, Clemson, SC. He received his M.D. degree from the Medical University of South Carolina College of Medicine, Charleston, SC. He enjoys many sports and outdoor activities.

CLAUDIA DROC, M.D.

PGY-5 – (Cytopathology Fellow) - Dr. Droc is a graduate of the Univeristatea de Medicina si Farmacie Timisoara Timisoara-Romania in General Medicine. She received a degree as a Registered Nurse from the Liceul Sanitar Arad. She began a residency at the Univeristatea de Medicina si Farmacie Timisoara Timisoara-Romania. She completed her residency at the University of South Florida on June 30, 2008. She served as Chief Resident during the 2007/2008 year. Some of her hobbies are swimming, tennis, snow skiing, literature, music, computers and she loves to travel.

MASOUMEH GHAYOURI, M.D.

PGY-5 – (Surgical Pathology Fellow) - Dr. Ghayouri received a MD degree at the Tehran University of Medical Sciences in Tehran, Iran. She completed her Pathology Residency at the University of South Florida in May, 2008. She served as Chief Resident during the 2007/2008 year. Some of her hobbies are biking, swimming, reading, gardening, music and dance.

NAIEL HAFEZ, M.D.

PGY-5 – (Surgical Pathology Fellow) – Dr. Hafez received his M.D. Degree the University of Aleppo Faculty of Medicine in Aleppo-Syria. He completed his residency at the University of Mississippi Medical Center, Jackson, Mississippi. He has completed a Neuropathology Fellowship with Virginia Commonwealth University, Richmond, Virginia. He was a Senior Resident with the Department of Pathology, Columbia University, Harlem Hospital Center, New York, New York.
TIMOTHY McCARDLE, M.D.

PGY-5 – (Dermatopathology Fellow) Dr. McCardle received his Associate of Arts degree from the Copiah-Lincoln Community College. He received a B.S. degree in both Chemistry and Molecular Biology from the University of Southern Mississippi. He received his M.D. degree from the University Of Mississippi School Of Medicine. He completed his Residency in Anatomic and Clinical Pathology and a Surgical Pathology Fellowship from the Washington University/Barnes Jewish Hospital. His hobbies include hiking, biking, fishing, and cooking.

OMIE MILLS, M.D.

PGY-1 – Dr. Mills received her B.S. degree in Medical Technology from the Southern College of Seventh-Day Adventists, Tennessee in 1992 and received her M.D. Degree from the Loma Linda University School of Medicine in California in May, 1997. She has worked as a Health Director for the Kahili Adventist School and Park in Koloa, Hawaii from July 2006-August 2007.

MOJDEH NAGHASHPOUR, M.D.

PGY-5 – (Hematopathology Fellow) Dr. Naghashpour received her B.S. in Physics from the University of Mississippi. She received her MS and PhD in Physics from the University of Miami, Coral Gables, Florida. She received a PhD in Physiology, Biophysics & Molecular Biology from the University Of Miami School Of Medicine. She also received her MD from the University of Miami. She completed her Anatomic and Clinical Pathology Residency at the Hospital of the University of Pennsylvania, Department of Pathology and Laboratory Medicine. She has completed a Surgical Pathology Fellowship at the Hospital of the University of Pennsylvania, Department of Pathology and Laboratory Medicine.

BRIAN QUIGLEY, M.D.

PGY-1 – Dr. Quigley is a graduate of the University of Missouri-Columbia, Columbia, Missouri where he received a B.S. degree in Biochemistry. He received his M.D. degree from the University Of Texas Medical Branch School Of Medicine at Galveston. Some of his hobbies and interests are Psalms, landscaping and home remodeling.

ELIZABETH M. SAGATYS, M.D.

PGY-6 – (Hematopathology Fellow) Dr. Sagatys is a graduate of the University of South Florida College of Medicine. She received her Bachelor’s degree in Biology and Chemistry from New College of Sarasota, FL. She received the Superior Presentation Award, USF College of Medicine Research Day February 2001; Florida Blood Services Foundation Research Stipend 2000. She completed her residency with the University Of South Florida College Of Medicine where she served as Chief Resident for the 2006/2007 year. She has also completed a Surgical Pathology Fellowship with the University of South Florida in 2007/2008. Her hobbies include playing the violin, dancing, tennis, visiting art museums.
and the theater.

XIAOHUI ZHANG, M.D.

PGY-1 – Dr. Zhang is a graduate of the Fourth Military Medical University, China where he received a M.B.; M.Med and Ph.D. degree. He has been a Postdoctoral Fellow and Research Associate with the University Of South Florida Department Of Pathology.
The Department of Pathology and Cell Biology at the University of South Florida Health, College of Medicine is an ACGME-accredited integrated 4-year residency program in Anatomic and Clinical Pathology. The basic core curriculum is complemented by a broad choice of electives allowing comprehensive preparation for either community or academic practice. Our program emphasizes progressive responsibility in patient care and teaching in a variety of practice settings, as well as ample opportunity for supervised research. Active participation in patient care services is complemented by an extensive lecture and conference series in all aspects of anatomic and clinical pathology.

The **Anatomic Pathology** curriculum includes training in autopsy and surgical pathology, electron microscopy, cytopathology, pediatric pathology, neuropathology, dermatopathology, forensic pathology, immunopathology, histochemistry, and ultrastructural pathology.

The **Clinical Pathology** curriculum includes training in microbiology (including bacteriology, mycology, parasitology, and virology), immunopathology, blood banking/transfusion medicine, chemical pathology, cytogenetics, hematology, coagulation, toxicology, medical microscopy (including urinalysis), molecular biologic techniques, and laboratory administration.

**EDUCATIONAL FACILITIES**

The Department of Pathology and Cell Biology at the University of South Florida Health, College of Medicine is located within the Health Sciences Center on the main Tampa campus. The Health Sciences Center is home to the medical school, which began in 1971 and currently accepts 120 freshman medical students each year. The Health Sciences Center includes a large and active multidisciplinary outpatient clinic and the Shimberg Health Sciences Library.

With service as its hallmark, the Hinks and Elaine Shimberg Health Sciences Library [http://health.usf.edu/library/home.html](http://health.usf.edu/library/home.html) offers innovative technologies, educational programs, reference services, research assistance, and access to electronic and print resources in the biomedical sciences. Founded in 1971, the Library supports the instructional and research activities of the Colleges of Medicine, Nursing, Public Health, and the School of Physical Therapy. The library offers 3 newly remodeled conference rooms, a computer lab and a comfortable environment for study or research activities. The Shimberg Library subscribes to 2,718 online journals, 265 print journals, 65 research databases and a collection of 30,650 health science books including 938 e-books. An extensive catalog of information is available full text online, and an interlibrary loan service offers researchers borrowing privileges from Universities nationwide. Professional librarians offer group and individualized instruction in the use of print and electronic resources and information management skills. For library training class information or to make an appointment for individual instruction please contact John Orriola at 974-2990. [http://hsc.usf.edu/nocms/library/usf_ill.html](http://hsc.usf.edu/nocms/library/usf_ill.html)
Located immediately adjacent to the Health Sciences Center and entirely staffed by University of South Florida College of Medicine faculty are the James A. Haley VA Medical Center and the H. Lee Moffitt Cancer Center and Research Institute. Tampa General Hospital, located in downtown Tampa, serves as a general teaching hospital for the College of Medicine and the Department of Pathology. Rotations are also available at several large affiliated hospitals and specialized sites including the Hillsborough County Medical Examiner's Office, Bay Pines VA Hospital, and Florida Blood Services.

The James A. Haley Veterans Hospital is a 327 bed tertiary care teaching hospital, with 300 authorized nursing home care beds (180 in Tampa, and 120 beds in Orlando) and is dedicated to providing the highest quality of patient care and services to veterans in Central Florida. The full range of inpatient and outpatient care is provided including Medicine (111 beds), Surgical (61 beds), Psychiatry (50 beds), Neurology (7 beds), as well as a 60-bed Spinal Cord Injury Service, and a 42 bed Comprehensive Rehabilitation Center.

Tampa is also responsible for three major Satellite Outpatient Clinics located in Orlando, New Port Richey, and Viera, as well as two Readjustment Counseling Centers in Orlando and Tampa. Community Based Outpatient Clinics (CBOCs) are located throughout Central Florida such as: Lakeland (Polk), Brooksville (Hernando); Sanford (Seminole), Zephyrhills (Pasco) and in Kissimmee (Osceola). The Tampa VAMC and its facilities serves veterans in eight counties of Central Florida: Brevard, Hernando, Hillsborough, Orange, Osceola, Polk, Pasco, and Seminole with a combined estimated veteran population of 435,442.

Tampa and its satellite clinics make up the busiest VA facilities in the nation. The hospital was activated in 1972 and is affiliated with the University of South Florida College of Medicine. Residency training programs are provided to 138 residents in most of the medical and surgical subspecialties, as well as Pathology, Psychiatry, and Radiology. Other training programs exist in Nursing, Audiology/Speech Pathology, Pharmacy, Social Work, Dietetics, Nuclear Medicine, Physical and Occupational Therapy, and Radiology.

The Pathology and Laboratory Medicine Service is staffed by full-time and part-time faculty members. In 2007, there were approximately 32,156 surgical specimens, 65,828 surgical slides, 217 bone marrow examinations, 13,512 immunohistochemistry slides, 48 autopsies, 9295 regular cytology (GYN&NON-GYN) and 480 fine needle aspiration specimens, 1,593,932 outpatient visits, and approximately 7,326,824 million clinical laboratory tests. There are facilities for immunohistochemistry, flow cytometry, and molecular pathology.
**Tampa General Hospital** is a 1000 bed county-funded institution located in downtown Tampa that serves as a primary teaching facility for the College of Medicine. A total of 230 autopsies, including approximately 150 embryo and early fetal autopsies, 20,200 surgical specimens, and 5,300 cytology samples are examined annually. The hospital has active kidney, liver, lung, pancreas and heart transplant programs, a Level 1 Trauma Center, a Regional Cardiovascular Center, and is the base for airborne adult and pediatric emergency teams. The clinical laboratory performs more than 3 million tests per year.

**H. Lee Moffitt Cancer Center and Research Institute** is a 162 bed specialized NCI-designated Comprehensive Cancer Center on the campus of the University of South Florida adjacent to the College of Medicine. Comprehensive in-patient and out-patient services are available through multidisciplinary groups in which pathology plays a vital role. Each year the laboratory accessions approximately 10,400 surgicals, 8,300 frozen sections, 8000 consultation/review cases, including approximately, 858 Cyto reviews, 8,200 cytology specimens (including 3362 non-gyn), 2300 bone marrow biopsies, 1911 fine needle aspiration biopsies and 20 autopsies. The laboratory also offers a full range of clinical pathology services and has facilities for immunohistochemistry and flow cytometry.

**COMMUNITY**

The Tampa campus of the University of South Florida and the College of Medicine are located in the rapidly growing suburban area of northeast Tampa. Housing is affordable and readily available in several pleasant local neighborhoods with easy access to the University, the beaches, and cultural activities of the downtown area. Tampa is home to Busch Gardens, the Florida Symphony, the world champion Tampa Bay Buccaneers, the world champion Tampa Bay Lightning, The Tampa Bay Storm, the Tampa Bay Devil Rays and the American Board of Pathology. The Tampa Bay area, which includes Tampa, St. Petersburg, and Clearwater, is a thriving community of 2.39 million people located on the Gulf of Mexico. The climate and location allow year round outdoor recreational activity including game fishing, sailing, boating, tennis, and golfing.
STIPENDS AND BENEFITS

Stipends for house officers at the University of South Florida Health, College of Medicine are revised annually and are generally above those for the south. The stipend level is based on PGY level. Stipend levels for 2008/2009 are:

USF Health
2008 - 2009 Resident Salary Schedule

<table>
<thead>
<tr>
<th>PGY Level</th>
<th>Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY I</td>
<td>$43,800</td>
</tr>
<tr>
<td>PGY II</td>
<td>$45,600</td>
</tr>
<tr>
<td>PGY III</td>
<td>$47,200</td>
</tr>
<tr>
<td>PGY IV</td>
<td>$48,900</td>
</tr>
<tr>
<td>PGY V</td>
<td>$50,600</td>
</tr>
<tr>
<td>PGY VI</td>
<td>$52,500</td>
</tr>
<tr>
<td>PGY VII</td>
<td>$53,500</td>
</tr>
</tbody>
</table>

The State of Florida has no State Income Tax. Comprehensive health insurance and limited disability insurance are provided by the University. Professional liability insurance is furnished by the State of Florida for training related incidents.

First year residents are entitled to two weeks of paid vacation. PGY 2 and above receive three weeks paid vacation. An additional week is allowed for conferences/educational leave. 2 weeks sick leave is allowed. Maternity/paternity leave is given. (see house officer personnel policies) Numerous child care facilities are available on and off campus. White lab coats are provided free of charge. Other benefits and discounts are available through the House Staff Association.
PATHOLOGY RESIDENCY CORE CURRICULUM

The four years of combined anatomic & clinical pathology training are divided as follows:

- 22 mos. AP (assigned as follows) Core Curriculum
- 20 mos. CP (assigned as follows) Core Curriculum
- 6 mos. electives (AP or CP freely chosen)
- 48 mos. total

### Anatomic Pathology Core Curriculum

<table>
<thead>
<tr>
<th>Code</th>
<th>Rotation</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>AU-1</td>
<td>Autopsy pathology</td>
<td>1mo.</td>
</tr>
<tr>
<td>SP-1</td>
<td>Surgical path and autopsy</td>
<td>3mos.</td>
</tr>
<tr>
<td>SP-1</td>
<td>Surgical path and autopsy</td>
<td>3mos.</td>
</tr>
<tr>
<td>SP-1</td>
<td>Surgical path and autopsy</td>
<td>3mos.</td>
</tr>
<tr>
<td>CY-1</td>
<td>Cytology</td>
<td>1mo.</td>
</tr>
<tr>
<td>FP</td>
<td>Forensic path</td>
<td>1mo.</td>
</tr>
<tr>
<td>CY-2</td>
<td>Cytology and FNA</td>
<td>2mos.</td>
</tr>
<tr>
<td>CY-2</td>
<td>Cytology and FNA</td>
<td>1mo.</td>
</tr>
<tr>
<td>SP-2</td>
<td>Advanced surg path and autopsy</td>
<td>2mos.</td>
</tr>
<tr>
<td>SP-2</td>
<td>Advanced surg path and autopsy</td>
<td>2mos.</td>
</tr>
<tr>
<td>SP-2</td>
<td>Advanced surg path</td>
<td>2mos.</td>
</tr>
<tr>
<td>PP</td>
<td>Pediatric Pathology</td>
<td>1mo.</td>
</tr>
</tbody>
</table>

The above rotations encompass training in anatomic pathology must include autopsy and surgical pathology, cytopathology, pediatric pathology, dermatopathology, forensic pathology, immunopathology, histochemistry, neuropathology, ultrastructural pathology, cytogenetics, molecular biology, aspiration techniques, and other advanced diagnostic techniques as required by the Accreditation Council for Graduate Medical Education.

### Clinical Pathology Core Curriculum

<table>
<thead>
<tr>
<th>Code</th>
<th>Rotation</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>MI</td>
<td>Microbiology</td>
<td>3mos.</td>
</tr>
<tr>
<td>CH</td>
<td>Chemistry</td>
<td>3mos.</td>
</tr>
<tr>
<td>HP-1</td>
<td>Hematopathology</td>
<td>3mos.</td>
</tr>
<tr>
<td>HP-2</td>
<td>Hematopathology</td>
<td>3mos.</td>
</tr>
<tr>
<td>LA</td>
<td>Laboratory Administration</td>
<td>1 mo.</td>
</tr>
<tr>
<td>BB</td>
<td>Blood Bank</td>
<td>2mos.</td>
</tr>
<tr>
<td>VI</td>
<td>Virology</td>
<td>1mo.</td>
</tr>
<tr>
<td>MP</td>
<td>Molecular Pathology</td>
<td>1mo.</td>
</tr>
<tr>
<td>CP-2</td>
<td>Advanced Clinical Path</td>
<td>3mos.</td>
</tr>
</tbody>
</table>

The above CP rotations encompass training in microbiology (including bacteriology, mycology, parasitology, and virology), immunopathology, blood banking/transfusion medicine, chemical pathology, cytogenetics, hematology, coagulation, toxicology, medical microscopy (including urinalysis), and molecular biologic techniques as set forth by the ACGME.
ROTATION DESCRIPTIONS

At the beginning of each rotation, the director is responsible for providing the resident with a copy of the rotation description, as well as the list of the required competencies for that rotation. These important documents contain required information such as the goals and objectives of the rotation, the duration of the rotation, the duties and responsibilities of residents at each year of training, the teaching staff responsible for the supervision and instruction of the residents during the rotation, and the manner in which residents are supervised and evaluated during the experience.

Copies of these rotation descriptions are kept on file with Sylvia Beacham in the Pathology Office and Cell Biology Office.

CURRENTLY APPROVED PATHOLOGY ELECTIVE ROTATIONS

<table>
<thead>
<tr>
<th>Code</th>
<th>Rotation Description</th>
<th>Location</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP-3</td>
<td>Senior anatomic pathology</td>
<td>VA</td>
<td>3 mos.</td>
</tr>
<tr>
<td>AUT</td>
<td>Autopsy pathology</td>
<td>TGH</td>
<td>1-3 mos.</td>
</tr>
<tr>
<td>NP</td>
<td>Neuropathology</td>
<td>TGH</td>
<td>1 mo.</td>
</tr>
<tr>
<td>PP</td>
<td>Pediatric pathology</td>
<td>TGH</td>
<td>1-3 mos.</td>
</tr>
<tr>
<td>TP</td>
<td>Transplant pathology</td>
<td>TGH</td>
<td>1-2 mos.</td>
</tr>
<tr>
<td>SP</td>
<td>Surg pathology, autopsy, cytopathology</td>
<td>Bay Pines VA</td>
<td>2-3 mos.</td>
</tr>
<tr>
<td>CP</td>
<td>Cytopathology</td>
<td>Bay Pines VA</td>
<td>1-2 mos.</td>
</tr>
<tr>
<td>AP-3</td>
<td>Advanced surgical pathology</td>
<td>MCC</td>
<td>1-3 mos.</td>
</tr>
<tr>
<td>SPC</td>
<td>Surgical pathology consultations</td>
<td>MCC</td>
<td>1-3 mos.</td>
</tr>
<tr>
<td>CY-3</td>
<td>Advanced cytology and FNA</td>
<td>MCC</td>
<td>1-3 mos.</td>
</tr>
<tr>
<td>CYM</td>
<td>Flow cytometry</td>
<td>MCC</td>
<td>1 mo.</td>
</tr>
<tr>
<td>DP</td>
<td>Dermatopathology</td>
<td>MCC or USF</td>
<td>1 mo.</td>
</tr>
<tr>
<td>HP-E</td>
<td>Hematology Pathology Elective</td>
<td>MCC</td>
<td>3 mos.</td>
</tr>
<tr>
<td>MP</td>
<td>Molecular pathology</td>
<td>MCC</td>
<td>1 mo.</td>
</tr>
<tr>
<td>IHC</td>
<td>Immunohistochemistry</td>
<td>MCC</td>
<td>1 mo.</td>
</tr>
<tr>
<td>FC</td>
<td>Flow cytometry</td>
<td>MCC</td>
<td>1 mo.</td>
</tr>
<tr>
<td>RSH</td>
<td>Research (by specific arrangement and approval of the RTC)</td>
<td>MCC</td>
<td>1-6 mos.</td>
</tr>
<tr>
<td>FP</td>
<td>Forensic pathology</td>
<td>ME</td>
<td>1-6 mos.</td>
</tr>
</tbody>
</table>

Note: The above electives should be combined in blocks of 3 months. Detailed rotation descriptions (required and elective) are available through Sylvia Beacham.
ACGME GENERAL COMPETENCIES

Beginning in July 2002, all ACGME-accredited residency programs are required to define specific learning objectives for residents to demonstrate knowledge in six areas essential to becoming a competent physician. Programs must define the specific knowledge, skills, and attitudes required and provide educational experiences as needed in order for their residents to demonstrate achievement of these “General Competencies”, which are defined below. Instruction in these competencies is being integrated into the residency program in areas of both clinical and didactic experiences. Rotation evaluations will include assessment of skills in these areas. In the future, we will be required to evaluate how residents learn and demonstrate knowledge of these competencies, and eventually use this data to improve our program. The six areas defined are:

1. **Patient care** that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents must demonstrate a satisfactory level of diagnostic competence and the ability to provide appropriate and effective consultation in the context of pathology services.

2. **Medical knowledge** about established and evolving biomedical, clinical, and cognate (eg, epidemiological and social-behavioral) sciences and the application of this knowledge to pathology.

3. **Practice-based learning and improvement** that involves investigation and evaluation of their diagnostic and consultative practices, appraisal and assimilation of scientific evidence, and improvements in their patient care practices.

4. **Interpersonal and communication skills** that result in effective information exchange and collaboration with patients, their families, and other health professionals.

5. **Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

6. **Systems-based practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide pathology services that are of optimal value.
The Office of Graduate Medical Education has created a Housestaff Website (http://www.med.usf.edu/housestaff) which contains important references and articles to supplement the teaching of these competencies. While implementation of this curriculum is primarily the responsibility of the program director, each resident shares in the responsibility for the development of an ongoing program that includes these critical areas of education which may not directly link with the curriculum of your chosen specialty. Please recognize the importance of this area and integrate it into your ongoing program of self-study:

1. Ethics
   - Residents should develop an understanding of basic ethical principles.
   - Residents should understand and protect patients’ rights.
   - Residents should understand their ethical responsibility to society.
   - Residents should understand the principles of ethical research.

2. Scholarship and Life-long Learning
   - With assistance of mentors and colleagues, residents should establish personal standards for their behavior, attitudes, skills, and knowledge.
   - Using external and subjective evaluative methods, residents should assess their learning/development needs and establish a plan for self-improvement.
   - Residents should develop an ability to assess the medical literature critically.
   - Each resident should apply the basic principles of the scientific method in his/her practice setting.
   - Residents should participate in scholarly activities.

3. Physician as Communicator and Teacher
   - Residents should demonstrate the effective communication skills essential to the practice of medicine.
   - Residents should lead and work with others in creating an educational environment and in caring for patients.
   - residents should become competent in teaching clinical skills and professional attitudes and behaviors.

4. Personal and Professional Development
   - residents should be altruistic, putting the interest of the patient and the community before their own. residents should be accountable to both patients and the community.
   - residents should deal with patients, families, and colleagues with honesty and integrity.
   - residents should strive to achieve excellence in all aspects of their academic and professional endeavors.
   - residents should show respect for others.
   - residents should develop the skills that will help them balance a demanding career with a fulfilling personal and family life.
5. Medical Practice Issues

Competency must be achieved in:

1. Medical/legal requirements.
3. Healthcare organizational development.
4. Practice management techniques.

- Residents should understand basic legal terms and concepts related to the practice of medicine, especially their legal obligations regarding patient information and the provision of end-of-life care.
- Residents should be knowledgeable about the basic concepts, principles, and language of health care economics, including the variety of reimbursement systems and the mechanisms for assessing quality of care.
- Residents should understand how governmental regulatory and independent accreditation agencies monitor individual medical practices and healthcare organizations.
- Residents should understand the “business” aspects of managing a medical practice, including appropriate selection/employment of medical personnel.
Residency training involves both a responsibility and a commitment that requires a greater number of hours than the traditional job. Medicine is a profession, and as such, individuals make commitments to patients that exceed those of most of modern society. This pathology residency program has assigned duty hours, and it is the expectation that the resident will be present at all assigned times. In general, AP rotators are expected to be present 8 a.m. to 5 p.m., except when: a) on frozen section duty when they should arrive at 7:30 a.m. and depart after the last frozen section is completed; b) on grossing duty when they should depart after the last required specimen has been grossed, cassetted and immersed in fixative. CP rotators should be present from 8 a.m. to 5 p.m. It is recognized that events and circumstances may require additional time spent in patient care activities over and above routine work hours. This is at the discretion of each rotation director, but they are required to notify the residents in advance of the expectations regarding duty hours over the above-stated guidelines. It is understood that residents who agree to participate in the program will meet the requirements. Absence from clinical duty during anticipated duty hours is considered an unexcused absence and will be addressed. Individuals with repeat absence during scheduled duty hours may be considered for adverse action.

Residents will not be scheduled for more than 80 duty hours per week, averaged over a four-week period. At least one, and usually two days in seven will be free of patient care responsibilities, averaged over a four-week period. Residents will take call no more frequently than every third night, also averaged over a four-week period. When residents take call from home and are called into the hospital, the time spent in the hospital is counted toward the weekly duty hour limit.

Absence from duty requires advance written permission from the program director with approval by the Associate Dean for Graduate Medical Education.

Each hospital maintains a schedule of on-call activities for nights and weekends. Most hospitals allow residents to take call from home. In either case, individuals who are on-call are expected to be immediately available and ready to work during the entire period of assigned call.

Individuals who believe that the time requirements are excessive have the opportunity to question the duty hour assignment, either with the program director or with the Associate Dean for Graduate Medical Education. The University of South Florida Graduate Medical Education Committee supervises resident duty hours and night call but also recognizes that patient needs come first. Individuals who are scheduled to take night call and are not available or do not execute their responsibilities are subject to adverse action.
Residents are eligible to apply for certification by the American Board of Pathology in their fourth year of training. As the application is extensive, the following materials, taken directly from the American Board of Pathology Application, is provided. We recommend that residents begin keeping a log of these items from the beginning of residency. Autopsy, FNA and bone marrow biopsy numbers need to be exact, the others are usually estimated. Clinical pathology consultations include: SPEPs, UPEPs, flow cytometry, hemoglobin electrophoresis, review of send out labs, etc. It is very convenient to keep track of autopsies, FNAs, and bone marrow biopsies in your procedure/case account with the ACGME. You can enter the age, sex, and primary diagnosis in the comment field.

**AMERICAN BOARD OF PATHOLOGY**

Residents should report only those autopsies in which they have an active role (as appropriate to the case) in each of the following: review of history and circumstances of death; external examination of the body; gross dissection; review of microscopic and lab findings; preparation of written description of gross and microscopic findings; development of opinion on cause of death; review of autopsy report with teaching staff.

<table>
<thead>
<tr>
<th>H. PROFESSIONAL RESPONSIBILITY DURING PATHOLOGY TRAINING PROGRAM</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Total number of autopsies performed by you.</strong> Residents should report only those autopsies in which they have an active role (as appropriate to the case) in each of the following: review of history and circumstances of death; external examination of the body; gross dissection; review of microscopic and lab findings; preparation of written description of gross and microscopic findings; development of opinion on cause of death; review of autopsy report with teaching staff.</td>
</tr>
<tr>
<td><strong>4 Year Total</strong></td>
</tr>
<tr>
<td>a. <strong>Number of shared autopsies.</strong></td>
</tr>
<tr>
<td>b. <strong>Number of limited autopsies.</strong></td>
</tr>
<tr>
<td>c. <strong>Number of forensic autopsies.</strong></td>
</tr>
<tr>
<td><strong>2. Number of surgical specimens</strong> examined by you.</td>
</tr>
<tr>
<td><strong>3. Number of cytopathologic specimens</strong> examined by you.</td>
</tr>
<tr>
<td><strong>4. Number of bone marrows</strong> performed by you.</td>
</tr>
<tr>
<td><strong>5. Number of FNAs</strong> performed by you.</td>
</tr>
<tr>
<td><strong>6. Clinical pathology consultations</strong> participated in by you. A clinical consultation is defined by the ABP as any interaction (formal or informal) between you and another health care professional regarding handling of specimens and/or interpretation of data. These consultations may be oral or written and do not have to be billable. <strong>Do not include written anatomic pathology reports.</strong></td>
</tr>
<tr>
<td>**7. List on separate page(s) all of the necropsies that you have performed, giving only age, sex, primary diagnosis, and date performed. <strong>Do not send complete autopsy reports.</strong> The minimum number of autopsies expected is 50.</td>
</tr>
</tbody>
</table>

**American Board of Pathology**

www.abpath.org
POLICY ON MOONLIGHTING

Moonlighting is defined as work for compensation performed outside of the regular, assigned duties of your specific rotations. It is performed after regular duties are completed, generally after normal working hours (i.e. after 5 p.m. and on weekends). Because residency education is a full-time endeavor, any moonlighting that you engage in must not interfere with your ability to achieve the goals and objectives of the residency program.

Before you accept a moonlighting job, you are required to notify the residency director, and you must receive approval for moonlighting in writing. This letter will be placed in your residency file. Documentation of amount of time moonlighting is part of your annual evaluation. If at any time one of your rotation directors or the program director feels that moonlighting activities are interfering with your duties and responsibilities, we reserve the right to require that you discontinue such activities.

Any hours you work for compensation at the VA, TGH, or MCC will be considered part of the 80-hour weekly limit on duty hours.
ROTATION CHANGE REQUEST POLICY

Changes in the assigned rotation schedule may become necessary throughout the year for a variety of reasons including maternity leave. When a change is being contemplated, a variety of factors may affect its approval, most importantly being the availability of funding at the sponsoring institution.

If you have any questions concerning funding of rotations, please ask one of the Program Directors. If a schedule change becomes necessary, a ROTATION CHANGE REQUEST FORM must be filled out by the resident, signed by one of the Program Directors, and turned in to Sylvia Beacham in the Pathology Office. Please turn this in as early as possible, but no later than ten days before the month in which the change is to be made.
USF HEALTH
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY
ROTATION CHANGE REQUEST FORM

Resident name:___________________________________________________________

Request change of rotation from___________________________________________

to___________________________________________ in month_________________

Reason for change:________________________________________________________

Approval signature:________________________________________________________

Dr. Shutter or Dr. Nicosia

Rotation change requests must be signed by Dr. Shutter or Dr. Nicosia and submitted to Sylvia Beacham at least ten days before the beginning of the month in which the change is being made.
The four-year AP/CP curriculum is achieved by a fixed curriculum composed of 42 months of required rotations (22 months anatomic pathology and 20 months clinical pathology) as well as 6 months of elective rotations. The specific goals and objectives of each rotation, as well as the manner in which progressive responsibility is achieved, are detailed in the rotation descriptions. The following is a concise summary of the general duties of each resident at each level of residency training.

<table>
<thead>
<tr>
<th>POST GRADUATE YEAR</th>
<th>ANATOMIC PATHOLOGY</th>
<th>CLINICAL PATHOLOGY</th>
</tr>
</thead>
</table>
| PGY-1               | • Learn technique of autopsy dissection with supervision  
                    • Dictate gross autopsy findings independently  
                    • Sign out gross and microscopic findings with attending supervision  
                    • Gross surgical specimens with supervision  
                    • Become familiar with performing frozen section technique  
                    • Assess surgical slides before sign-out and prepare simple differential diagnoses  
                    • Introduction to principles of histochemical and immunohistochemical staining  
                    • Introduction to exfoliative cytology  
                    • Perform bone marrow biopsy with supervision  
                    • Learn how evaluate a basic bone marrow biopsy  
                    • Understand processing techniques for bone marrow aspirate and biopsy  
                    • Learn anemia workup  
                    • Introduction to flow cytometry techniques  
                    • Be responsible for nighttime and weekend coverage of clinical pathology lab, with attending backup  
                    • Observe laboratory teaching sessions in MSII pathology course |
| PGY-2               | • Perform autopsy dissection without supervision, be proficient in autopsy presentation skills  
                    • Dictate gross and microscopic autopsy findings before sign-out with attending  
                    • Gross surgicals independently  
                    • Working knowledge of specimen processing, cutting, and staining  
                    • Familiarity with IHC stains and their use in differential diagnoses  
                    • Interface with clinicians in workup of surgical specimens/diagnoses  
                    • Assess surgical slides and begin to develop more sophisticated differential diagnoses  
                    • Learn techniques and performance of FNA’s, body fluid exam  
                    • Attend CT-guided FNA’s and assess adequacy of specimen  
                    • Perform and stain touch preps and rapid IHC staining on cytology samples  
                    • Assess cytology microscopic specimens before sign-out and be prepared with differential diag.  
                    • Evaluate patients for autologous donation  
                    • Cover clinical laboratory call day and night, with attending backup  
                    • Learn microbiologic culture and plating techniques  
                    • Learn basic of microbiologic specimen identification and correctly workup three unknown bacterial specimens  
                    • Learn basics of parasitology and fungal identification  
                    • Attend MSII laboratory sessions and help attending present gross specimens |
| PGY-3               | • Complete entire autopsy with minimal supervision  
                    • Learn principles of blood banking, including |
<table>
<thead>
<tr>
<th>PGY-3</th>
<th>PGY-4</th>
</tr>
</thead>
</table>
| • Perform and diagnose frozen section with attending backup  
• Correctly complete gross and microscopic dictation on most surgicals before sign-out with attending  
• Become more sophisticated with differential diagnosis of surgical specimens  
• Be familiar with techniques and interpretation of immunofluorescence and electron microscopic specimens  
• Independent consultation with clinicians in w/u of surgicals  
• Present surgical cases in multidisciplinary conferences | • Evaluation of donor eligibility  
• Correct hospital consults on pheresis patients  
• Learn principles and techniques of crossmatch and compatibility, with bench experience  
• Chemistry stuff  
• Lab administration  
• Teach MSII laboratory sessions with attending supervision |
| • Complete entire autopsy with minimal supervision  
• Perform, diagnose, and call frozen section result with attending backup  
• Correctly complete gross and microscopic dictation, including ordering IHC and special stains, on majority of surgicals before sign-out with attending  
• Have sophisticated knowledge of difficult cases, with frequent use of literature for backup  
• Be proficient in use and interpretation of special diagnostic techniques, including molecular biologic techniques  
• Regularly consult with clinicians in multidisciplinary conference and in workup of cases  
• Supervise junior residents in gross and microscopic diagnoses | • Develop sophisticated knowledge in the diagnoses of neoplastic hematopathology, including uses of flow cytometry, cytogenetics, and molecular biologic techniques  
• Dictate hematology consultation cases with attending backup  
• Virology  
• CP-2 descriptions  
• Teach MSII laboratory sessions with attending backup  
• Serve on a hospital administrative committee |
USF HEALTH
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY CONFERENCES

The Department of Pathology and Cell Biology conferences are attended by pathology residents and fellows, graduate and postdoctoral trainees, faculty as well as University and Community physicians. Speakers at conferences include department faculty and residents, other university faculty, and distinguished pathology faculty and scientists from other institutions.

Purpose:
- To disseminate knowledge of all aspects of pathology to all attendees.
- To supplement the training residents receive on formal rotations.
- To provide an opportunity for residents to gain public speaking and presentation skills.
- To expose the attendees to ongoing research and new developments in pathology and related basic science disciplines.

There are two categories of weekly conferences.

1. **Departmental** conferences which are held at USF, VA and MCC; required for all residents. These departments include the Tuesday morning block of conferences run primarily by the residents, monthly Forensic Pathology conference, and Friday morning Topics in Pathology Practice/Department of Pathology Grand Rounds.

2. **Hospital-sponsored** conferences which take place at the individual hospitals and are attended by residents rotating at those hospitals; attendance requirements established by the hosting hospital. These include gross autopsy conference, unknown conference, etc.

Residents are expected to arrange their daily schedules in order to attend required departmental conferences. The faculty at each of the affiliated institutions is aware of this requirement and will work with residents to allow for attendance.

The weekly USF conference schedule, including topics, times, and locations are published weekly in the "Updates in Pathology" flyer distributed to all residents and faculty by email.

Sample schedule of required departmental conferences:

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Topic</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>TUESDAY</td>
<td>8-11 a.m.</td>
<td>Didactic teaching conference in anatomic and clinical pathology</td>
<td>Weekly</td>
</tr>
<tr>
<td>THURSDAY</td>
<td>8:00-9:00 a.m.</td>
<td>Forensic Pathology Grand Rounds</td>
<td>Monthly If Basic Science</td>
</tr>
<tr>
<td></td>
<td>12:00 Noon - 1:00 p.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRIDAY</td>
<td>8:00-9:30 a.m.</td>
<td>Pathology Grand Rounds/Topics in Pathology Practice</td>
<td>Monthly</td>
</tr>
</tbody>
</table>
TUESDAY MORNING CONFERENCE SERIES

DIDACTIC COURSE IN ANATOMIC AND CLINICAL PATHOLOGY

Objective:
To present core material in anatomic and clinical pathology necessary for the practice of pathology and successful completion of the board examination. This course is taught in didactic fashion by core and clinical faculty of the Department of Pathology. Material is taught in 2-4 week blocks based on organ system (anatomic pathology) or major disciplines (clinical pathology).

Mechanism:
The Didactic Course uses core texts in pathology (Robbins, Henry, McClatchey) for resident review before conference. The conference is presented as PowerPoint presentations with handouts provided at the time of conference. The conference will be most successful if all attendees have read the material and are prepared to participate.

Residents and fellows are also expected to present at this conference on the topic of their choice. They usually will present 2-3 times during their training. Residents can sign up for available dates once the remainder of the conference schedule has been determined.

FELLOW CONFERENCE

Objectives:
To involve fellows in the teaching of residents, and to expose the residents to material in unknown case-based fashion. The fellow conference will increase the residents' exposure to cases and enhance residents' diagnostic ability.

Mechanism:
Each monthly conference is presented by one of the fellows in the Department of Pathology (cytopathology, surgical oncology, dermatopathology, pediatric pathology, forensic pathology). The fellow will select interesting and challenging slide-based cases, which will be distributed to the residents for viewing at least one week before the conference. The general topic will be assigned to the fellow ahead of time to ensure it is in line with the theme of the current block. At the conference, cases will be discussed and expounded upon using a PowerPoint presentation created by the fellow.

PATHOLOGY CASE STUDIES

Objective:
Case studies conference will increase residents' exposure to clinical pathology topics and topics in anatomic pathology that are not part of required rotations. These topics include, but are not limited to medical microbiology, blood banking, chemistry, lab management, coagulation, hematology, neuropathology, dermatopathology and renal pathology.

Mechanism:
Attendings assigned to present at these conferences may select from a variety of methods including circulation of unknown cases among the residents prior to the conference, unknown cases presented for the first time at conference or lecture format.

FORENSIC PATHOLOGY LECTURE SERIES

Objectives:

The lectures will expose the residents to the work of medical examiners and increase their knowledge and understanding of forensic pathology.

Mechanism:

Each lecture will be presented by one of the forensic pathologists employed at the Hillsborough County Medical Examiner Department, including Drs. Adams, Gulino, Chrostowski and Lee. The material will be presented using projection of kodachrome slides and discussion during the lecture is encouraged. Residents should familiarize themselves with the topic to be discussed prior to the lecture using one of several forensic pathology textbooks.

GRAND ROUNDS/TOPICS IN PATHOLOGY PRACTICE

Objective:

To present current information in the fields of basic science research and practical diagnostic pathology to Pathology and cell Biology faculty, graduate students, postdoctoral fellows, pathology residents and fellows as well as to interested University faculty and medical community.

Mechanism:

The Pathology and Cell Biology department will invite expert speakers from around the country and from within the department to speak on a variety of topics in anatomic and clinical pathology, cancer pathobiology, neurosciences and intercellular matrix.

When possible, speakers may also conduct a microscope session specifically for the residents later in the day where interesting cases will be discussed.
INTRODUCTORY SESSIONS TO PATHOLOGY RESIDENCY TRAINING PROGRAM

INTRODUCTION

The purpose of the sessions is to provide a basic core of knowledge through a series of introductory discussions. These are presented by academic faculty, supervisors and senior residents. These sessions will allow the incoming resident to understand the introductory concept of Anatomic and Clinical Pathology, define responsibilities of Pathology Residents at USF, assure all paperwork is completed, and provide a foundation for handling of on-call problems. The introductory sessions are designed as a series of core presentations for the incoming residents. They are specifically targeted to the PGY 1 resident but are available to any resident. A variety of topics are covered in lectures or demonstrations comprising a series of introductory sessions. These begin at 8 am and are completed by 9:30 each day, allowing the resident to resume their assigned duties by 10:00 am that day.

Autopsy Technique is a session at the Medical Examiner's Office. Two residents will be assigned at one time. The session will begin at 8:30 am. The session is for an entire day and each resident will be assigned for a period of two days.
## New Resident Introduction Sessions for 2008 - 2009

<table>
<thead>
<tr>
<th>Session Title</th>
<th>Facilitator</th>
<th>Date</th>
<th>Room Location</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome and General Orientation</td>
<td>Drs. Messina &amp; Nicosia</td>
<td>Thursday June 26</td>
<td>MDC 2301</td>
<td>8:30 a.m.</td>
</tr>
<tr>
<td>Safety</td>
<td>Maria Rubero-Lung</td>
<td>Wednesday July 2</td>
<td>JA Haley VA D-184</td>
<td>8:00 am – 12:00 Noon</td>
</tr>
<tr>
<td>Autopsy Techniques</td>
<td>Dr. Vernard Adams</td>
<td>Tuesday July 8</td>
<td>ME Office</td>
<td>8:30 am – 4:00 pm</td>
</tr>
<tr>
<td>Gross Dissection and Frozen Section/Practical Skills</td>
<td>Dennis Hall &amp; Sharon Baugh</td>
<td>Thursday July 10</td>
<td>MCC 2148</td>
<td>8:00 am – 9:30 am</td>
</tr>
<tr>
<td>Grossing Techniques</td>
<td>Lisa Patterson</td>
<td>Monday July 14</td>
<td>MCC 2148</td>
<td>8:00 am - 9:00 am</td>
</tr>
<tr>
<td>Autopsy Techniques</td>
<td>Dr. Vernard Adams</td>
<td>Tuesday July 15</td>
<td>ME Office</td>
<td>8:30 am – 4:00 pm</td>
</tr>
<tr>
<td>Histology I</td>
<td>Dr. Jennifer Reed</td>
<td>Wednesday July 16</td>
<td>JA Haley VA D-184</td>
<td>8:30 am – 9:30 am</td>
</tr>
<tr>
<td>Billing Integrity Compliance Training</td>
<td>Dr. Jane Messina</td>
<td>Thursday July 17</td>
<td>MCC 2148</td>
<td>8:00 am – 9:00 am</td>
</tr>
<tr>
<td>Special Stains</td>
<td>Dr. Michael Morgan</td>
<td>Friday July 18</td>
<td>JA Haley VA D-184</td>
<td>8:00 am – 9:30 am</td>
</tr>
<tr>
<td>Overview of Moffitt’s SRC Process and Introduction to the USF IRB Process</td>
<td>Angie Reagan</td>
<td>Monday July 21</td>
<td>MCC 5136</td>
<td>8:00 am – 9:30 am</td>
</tr>
<tr>
<td>Cytology</td>
<td>Dr. Santo Nicosia</td>
<td>Tuesday July 22</td>
<td>MDC 2151</td>
<td>8:00 am – 9:00 am</td>
</tr>
<tr>
<td>Shimberg Health Sciences Library Orientation for the Pathology Residents</td>
<td>John Orriola, MA/Kristen Morda</td>
<td>Wednesday July 23</td>
<td>Library 2nd Floor</td>
<td>8:00 am – 10:00 am</td>
</tr>
<tr>
<td>An Introduction to Departmental Educational Activities &amp; Resources</td>
<td>Michelle Lyons</td>
<td>Wednesday July 23</td>
<td>Library 2nd Floor</td>
<td>8:00 am – 10:00 am</td>
</tr>
<tr>
<td>Hematology II &amp; Special Stains</td>
<td>Dr. Hernani Cualing</td>
<td>Thursday July 24</td>
<td>MCC 5136</td>
<td>8:00 am – 9:30 am</td>
</tr>
<tr>
<td>Basic Care &amp; Microscope Skills</td>
<td>Dr. Ted Strickland</td>
<td>Tuesday July 29</td>
<td>JA Haley VA D-184</td>
<td>8:00 am – 9:30 am</td>
</tr>
</tbody>
</table>
While the volume and variety of procedures performed by pathology residents is quite different from most other medical residents, it is necessary to keep track of procedures you perform. This information will be required for credentialing by the American Board of Pathology, is needed as part of the ACGME accreditation process, and is requested yearly by the USF Graduate Medical Education Committee. Currently, the ABP requires 50 autopsies to be performed per resident. The ACGME requires each resident examine at least 2000 surgical cases, 1500 cytology cases, and 200 frozen sections.

As of July 2004, all residences will be required to use the ACGME’s Case Log system. This is available online at [www.acgme.org](http://www.acgme.org). Doing so requires a username and password which will be given to you during orientation.
RESEARCH REQUIREMENT

The Department considers research an integral part of preparation for the practice of pathology. Residents interested in academic practice will have the opportunity through elective time to pursue research projects in more depth than the required minimum. Residents who wish to enter community practice may spend elective time refining diagnostic skills or beginning to pursue a subspecialty. However, the Department believes that all residents, regardless of their career direction, should actively participate in at least one research project. Through this activity, residents will learn to ask appropriate and defined questions (hypothesis formulation), seek the best ways of answering questions (experimental design), judge the reliability of information (data acquisition and controls), assess the relevance of information (statistical analysis), and weigh the validity of conclusions (statistical inferences). Experience with this process is valuable in daily practice in both community and academic pathology.

The following pages contain a list of faculty research interest. Each resident should approach faculty members who have listed projects that may be of interest to the resident. After discussion of the project and mutual consent, the resident under supervision of the faculty member will be responsible for all phases of the project including hypothesis formulation, literature review, experimental design, data acquisition, statistical analysis, and conclusions. A resident may also pursue an original project of his or her own design by collaborating with a willing faculty member. The scope of projects that will be considered appropriate range from clinical/pathological correlation to basic bench research. The individual faculty member will be responsible for securing space and funding for the proposed research. Residents may also be able to obtain departmental funding (p. 17).

In the spring of the PGY4 year each resident will present his/her project at the Pathology Residents Spring Research Seminar. This seminar will be held each year and attended by current residents, Pathology faculty, alumni of the USF Pathology Residency Training Program, and all other interested faculty and residents in the College of Medicine. Each presentation will be approximately thirty minutes in length and all PGY4 pathology resident will be required to present. Projects may begin as soon as the PGY1 year but should be well in progress by the beginning of the PGY3 year. Research activities may be pursued concurrently with required rotations and/or during elective time. All other responsibilities of a required or elective rotation must be satisfied before a resident may spend time doing research.

This component of the Residency Training Program was instituted in July 1992, and the first required Pathology Residents Spring Research Seminar was held in the spring of 1996. Involvement in research outside of this program is also strongly encouraged. In addition, presentation at national meetings and publication in peer-reviewed journals is encouraged and will be supported by the Department upon individual approval (see Resident Research and Travel Funding).
RESIDENT RESEARCH AND TRAVEL FUNDING

All residents are required to participate in and present a research project during their training period; this research can take several different forms (see Research Requirement). All research projects must take place under the direction of a USF faculty member, preferably from the Department of Pathology and Cell Biology. This may take place while performing other rotations, or the resident may request elective time for research; the latter must be approved in advance with approval of the residency directors.

Before commencing any research, a one-page proposal documenting the hypothesis, goals, methods, expected results, and a brief budget must be submitted to Dr. Nicosia and the residency directors for approval. Failure to do so will result in lack of funding/travel support/requested elective time. Any funding that may be needed must be approved by Dr. Nicosia. Travel to meeting without previous authorization and approval of research plan(s) will not be reimbursed.

Please note that IRB approval is needed for any research involving patient chart review or usage of surgical pathology archival material. For forms and instructions, go to www.usf.edu, click “Research” link, go to Research Compliance” and then “Forms and Templates” section.

If the research is to be submitted for poster or platform presentation at a meeting, which would require travel expenses, a Travel Authorization form detailing anticipated expenses should be filled out and approved by the Chairman BEFORE the abstract is submitted for acceptance. It is also expected that, after presentation of an abstract, a manuscript of the research be submitted for publication. An individual’s publication “track record” will reflect favorably on the department, the resident, and the resident’s future ability to travel to meetings.
RESIDENT REQUEST FOR RESEARCH ELECTIVE/FUNDING

NAME OF PROJECT:

IRB # (IF USING PATIENT CHARTS/SURGICAL PATHOLOGY MATERIAL):

SUPERVISING FACULTY:

HYPOTHESIS:

METHODS TO BE USED:

ANTICIPATED RESULTS:

BUDGET: $____________________________

APPROVAL:______________________________________

___________________________     __________________________
Dr. Nicosia                 Dr. Shutter
Instructions for reimbursement

In order to obtain a timely reimbursement for allowable expenses we ask that you follow the instructions listed below. It is imperative that all original receipts and credit card statements with any corresponding/related charges be submitted (this is a mandated requirement by the State of Florida auditors).

- Complete both W-9’s and sign as indicated
- Complete the USF Travel Expense Report (TER) and sign as indicated
- Submit all original receipts, including credit card statements for reimbursement
- Return both W-9’s, all receipts & credit card statements in which you are seeking reimbursement in envelope provided
- All receipts must be processed within 45 days of travel date

Return all forms and receipts in the envelope provided for reimbursement to Sylvia Beacham at MDC Box 11.

Questions:
Chantel LeBlanc
dleblanc@health.usf.edu
813-974-0534
Changes to current USF Travel Policy

June 2007

Florida Legislation passed in May of 2007 mandates that the Board of Governors and Universities are subject to FS112.061 travel rules.

As of July 1, 2007, all Florida public universities are required to adhere to statutory requirements for reimbursements.

While existing USF Travel policies will remain in place until the effective date, the rules and policies that will be impacted by the change are highlighted below.

Changes to current policy, effective and applicable to all travel occurring on or after July 1, 2007:

TRANSPORTATION

Mileage reimbursed for the use of personal vehicles while conducting USF business will be paid at rates pursuant to FS 112.061(7)(d)1.a. The current Florida statutory rate is 44.5 cents per mile.

DOMESTIC MEAL ALLOWANCE

Domestic travelers will be paid meal allowances pursuant to FS112.061(6)(a-c) as follows:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td>$6</td>
</tr>
<tr>
<td>Lunch</td>
<td>$11</td>
</tr>
<tr>
<td>Dinner</td>
<td>$19</td>
</tr>
<tr>
<td>Total for day</td>
<td>$36</td>
</tr>
</tbody>
</table>

Meals for first and last days of domestic travel are based on times of departure and return. On first and last days, travel must begin before 6am and extend past 8am to qualify for breakfast; begin before Noon and extend past 2pm to qualify for lunch; and begin before 6pm and extend past 8pm to qualify for dinner.

Meals included in the cost of registration fees or otherwise paid by USF must be deducted from the daily meal allowance.

Deviation from the published statutory meal allowances is not allowed without prior approval from the USF Finance Council. Under no circumstances may the meal allowance claimed exceed the published state rates.

There is currently no meal or Flat Per Diem reimbursement for one day travel not involving an overnight stay.

Travel to Non-contiguous (Hawaii and Alaska) and US Possession (Puerto Rico and the Virgin Islands) destinations will be paid meal allowances pursuant to FS112.061(6)(a-c) in the same manner and under the same rates as domestic travel.
FOREIGN TRAVEL

Statutory changes will not impact current foreign travel rules and policies. International Foreign travel will continue to be paid pursuant to allowances provided by the US Department of State.

FLAT PER DIEM

Per Florida statute, Flat Per Diem may be claimed for any domestic or foreign travel in lieu of claiming actual lodging receipts and daily meal allowances.

The $80 daily rate is intended to reimburse for both lodging and meal expenses.

Any meals provided to the traveler at USF expense via a paid registration must be deducted from the daily $80 at the statutory rates of $6 for breakfast, $11 for lunch and $19 for dinner.

For figuring Flat Per Diem on the first and last days of travel, the travel day is divided into four quarters worth $20 each. The traveler should claim $20 for each quarter during which he or she is traveling.

Flat Per Diem should not be claimed in conjunction with any actual lodging or meal claims for the same day or trip.

Please be advised that while most rates and calculations will be automatically populated in the coming FAST Travel module, preparers and approvers of travel authorizations and expense reports should be aware of current policies and procedures in order to correctly submit reimbursement requests.

Should you have questions or concerns regarding these changes, please do not hesitate to contact the Travel Department. (www.usf.edu/controller/travel)
RESEARCH INTERESTS

Geza Acs, M.D.-MCC
Pathologic diagnosis of benign and malignant lesions of the breast and female genital tract. In addition to clinicopathologic studies on malignant tumors of the breast and female genital tract, Dr Acs' main research interest focuses on the role of tumor hypoxia and erythropoietin receptor signaling in the development, progression and treatment resistance of carcinomas of the breast and female genital tract. Dr Acs' lab has previously shown that biologically active autocrine/paracrine erythropoietin signaling is present in these tumors and can be activated by low oxygen concentrations. Other areas of research interest in the lab include the role of altered tumor-stromal interactions and lymphangiogenesis in the metastasis and progression of breast cancer and the role of podoplanin in the progression and metastasis of cervical cancers.

Vernard Adams, M.D. Medical Examiner’s
Injuries and mechanisms of death in traffic fatalities with special interest in cervical spine injuries and air embolism. Autopsy techniques/methods.

Steven J. Agosti, M.D.-JAHVH
Evaluation of patients with lymphocytosis and the diagnosis by flow cytometry of cases of unexpected lymphoproliferative disorders. Flow cytometric evaluation of leukocyte adhesion and activation antigens and the effect of hemodialysis on the surface expression of these molecules.

Nazeel Ahmad, M.D.-VA
Study of novel molecular targets for urinary bladder cancer therapy. Use of long-term chemopreventive therapy for men with high-grade Prostatic Intra-epithelial Neoplasia, PIN-III. Role of Isoflavones (administration prior to radical prostatectomy) in prostate cancer.

Soner Altiok, M.D., Ph.D.
My research interests include development of Fine Needle Aspiration-based molecular assays to individualize targeted anti-cancer therapy.

Wenlong Bai, Ph.D.-USF
Function of estrogen receptors, their co-activators and target genes in mediating the effect of estrogens and antiestrogens on the proliferation and tumorigenesis of ovarian surface epithelial cells.

Kaaron Benson, M.D.-MCC
Platelet alloimmunization; Transfusion support of BMT recipients; Transfusion transmitted infections; Indications for blood component transfusion; New methods for tissue typing; HLA/disease associations; Peripheral blood stem cell collection/transplantation.

David Birk, Ph.D.-USF
Biology of collagen and extracellular matrix.
Andrew Borkowski, M.D.-VA
My main research interest involves investigation of molecular changes underlying prostate and urinary bladder neoplastic and non-neoplastic diseases with special emphasis on tumor proliferation and apoptotic processes.

Marilyn M. Bui, M.D., Ph.D.-MCC
Use of surgical pathology, cytopathology, and molecular pathology based approach to investigate the factors that are important in the diagnosis, prognosis, and prediction of bone and soft tissue as well as breast cancers.

Don F. Cameron, Ph.D.-USF
Basic science interests revolve around the Sertoli cell (SC) in two general categories: their structure and function in the testis (Intra-testicular SCs) and their structure, function and immunobiology outside of the testis (Extra-testicular SCs). Intra-testicular SCs: My primary expertise concerns the structure/function of SCs as they relate to spermatogenesis, especially spermatid differentiation (i.e. spermiogensis). I am currently most interested in the junctional cell: cell dynamics between SCs and spermatids, the cellular and hormonal (FSH, testosterone) regulation of the coupling and uncoupling of spermatids at the Sertoli-spermatid adhesion junction (ectoplasmic specialization - ES), and the role of the SC ESs in dysfunctional spermatogenesis and oligospermia.

Barbara Centeno, M.D.-MCC
Translational research projects using new technologies, including microarray analysis, to fine needle aspirations and other cytology samples. Improvement of the cytological diagnosis of pancreatic neoplasms and cystic lesions using a combination of morphology and adjunctive studies.

Jin Q. Cheng, Ph.D.-MCC
Cancer is a genetic disease that involves through a multiple-step processing, resulting from the accumulation of genetic lesions in at least three classes of genes: oncogene, tumor suppressor gene, and mutator gene. The products of these genes are elements of a cellular signaling network that directs cell proliferation or cell death. Our goal is to characterize genetic alterations in ovarian cancer and to identify the possible targets for prevention and treatment of this malignancy. Current research focuses on the normal cellular function of the AKT2 oncogene and its role in ovarian oncogenesis. Another major interest is to identify candidate tumor suppressor gene by positional cloning and positional candidate in ovarian carcinoma.

Tian Chuang, M.D.-MCC
My research interest includes genitourinary pathology.

Domenico Coppola, M.D.-MCC
Importance of the insulin-like growth factor 1 –receptor (IGFI-R) in cell transformation and tumor progression, with particular emphasis on colorectal, ovarian and prostatic adenocarcinoma. These studies involve the application of antisense strategies to in vitro and in vivo models of tumorigenicity and tumor metastasis. Dr. Coppola’s second research interest is the study of CD 44 expression in tumor metastases.
Hernani Cualing, M.D., Ph.D.-MCC
Invention of new Cancer diagnostic tools: Novel diagnostic techniques using immunophenotyping and immunoohistochemistry (Proteomics and diagnostics) data and Color Image analysis Decision trees and Neural networks.

Philip R. Foulis, M.D., M.P.H.-VA
The application of computers to medicine. Modification and investigation of laboratory utilization by clinicians.

Enid Gilbert-Barness, M.D.-TGH
Study of the Nature and Causes of Human Malformations and Developmental Abnormalities. Embryo and Fetal Pathology

Ardeshir Hakam, M.D.-MCC
Gynecologic and genitourinary tumors particularly ovarian, cervical and prostatic neoplasms as well as FNA Cytopathology of neoplastic lesions.

Shohreh Iravani, M.D.-MCC
Hematopathology; particularly lymphoblastic lymphoma presenting as lytic bone lesions and ocular adnexal lymphomas (extranodal marginal zone lymphomas).

Jean Johnson, M.D.-VA
Pathobiology of viral diseases with specific interest in viral integration sites; Dermatopathology with research in angiogenesis in thin melanomas, and studies of Basal cell carcinomas.

Loveleen Kang, M.D.-VA
My research interests include pathogenesis of hematological diseases especially myelodysplastic syndrome. Other interests are identification of diagnostic markers of prostate carcinoma.

Farah K. Khalil, M.D.-MCC
Pulmonary pathology with specific interest in translational research related to lung and colon carcinomas.

Roger D. Klein, MD, JD, FCAP - MCC
My research interests involve the translation of molecular genetic knowledge into clinical diagnostic tests for the evaluation and management of hematopoietic and solid tumor malignancies. This includes investigation into and acquisition of data concerning genotype-phenotype correlations that will allow us to optimize the clinical utility of molecular testing. In addition, I am actively engaged in research on the ethical, social, and legal implications of the human genome project (ELSI), with particular emphases in the areas of intellectual property and FDA and CLIA-related regulation.

Patricia A. Kruk, Ph.D.-USF
Main area of interest centers on human ovarian epithelial carcinogenesis. Current research focuses on ovarian epithelial cellular responses to a variety of DNA damaging agents as well as the capacity for these cells to repair DNA damage. This includes studies of genomic instability measured by
alterations in gene expression, cell-extracellular matrix interactions, and the signal transduction pathways that translate alterations at the genomic level to modulations in cellular behavior. While such studies should provide information about the origin and, perhaps, treatment of ovarian cancer, they are likely to have implications on normal ovarian growth and development, functioning, and aging.

Atilano Lacson, M.D.-ACH
My research interests revolve around the molecular pathogenesis of genetic forms of myopathies including myofilament diseases and sarcolemmopathies. The discoveries of functional inter-relationships between the myofilamentous and cytoskeletal elements of the muscle fiber and between these and the extrasarcoplasmic supporting molecules forming the basement membranes and the collagenous environment lay the groundwork for explaining some of these disease mechanisms.

German F. Leparc, M.D.-FBS
Application of biophotonics to diagnostic and quality control assays, by identifying the size, shape, chemical composition and concentration of particles in bodily fluids.

Tomasz Marzec, M.D.-MCC
Melanocytic proliferations.

John W. Mason M.D.-BP VA
Value in healthcare, use of information management, outcomes of services, evidence-based practices, and systems approaches in pathology and laboratory medicine.

Stephen Mastorides, M.D.-VA
Translational research in molecular pathology, in order to serve as a “bridge” between clinical applications and basic biomedical sciences.

Jane L. Messina, M.D.-USF and MCC
Pathologic evaluation of sentinel lymph node metastases in patients with malignant melanoma, especially with respect to prognostic factors in thin metastasizing melanoma. Applications of sentinel lymphadectomy in other solid tumors such as Merkel cell carcinoma, adnexal carcinoma, and squamous cell carcinoma.

Michael Morgan, M.D.-VA
Prostate cancer and the effects of hormones, apoptosis and tumors, Muir-Torre syndrome, appendageal (adnexal) tumors, cat scratch disease, melanoma.

Lynn C. Moscinski, M.D.-MCC
Hematopathology with special interest in acute leukemia; flow cytometric immunophenotyping and use of DNA probes in diagnosis of clonal hematologic disorders; active research interest in gene regulation in myeloid cells, cytokine interactions in multiple myeloma, and detection of minimal residual disease in blood and bone marrow.
Aejaz Nasir, M.D.-MCC
Molecular profiling of neuro-endocrine, breast and colon cancers to identify diagnostic, prognostic and predictive biomarkers. Discovery and validation of novel progression markers in pancreatic endocrine neoplasms.

Santo V. Nicosia, M.D., M.S.-USF

Michael F. Nolan, Ph.D., P.T.-USF
Neurological mechanisms underlying hypalgesia by means of transcutaneous electrical nerve stimulation

Karen Reeves, M.D.-TGH
My research interest is in Hematopathology and renal pathology.

Amyn M. Rojiani, M.D., Ph.D.-USF and MCC
Research interest in neuro-oncology has been directed to the "phakomatoses". Markers of malignant progression such as CD 44 and p53 expression as well as studies on expression of neurofibromin and erythropoietin are ongoing. Vascular pathology both in neuro-oncology and dementia are areas of significant interest and will continue to be explored both with the use of human tissue and animal models. Clinical research interests include atypical CNS infections particularly PRION diseases.

Ramon L. Sandin, M.D., M.S.-MCC
Diagnostic microbiology and infectious diseases, and technology transfer from the research to the clinical diagnostic microbiology laboratory. Molecular diagnosis with DNA probes and PCR. Developmental studies on technique optimization prior to implementation. Environmental-medical applications of PCR.

Samuel Saporta, Ph.D.-USF
Cell signaling pathways controlling differentiation of cancer stem cells, neural progenitor cells and adult stem cells to neural phenotypes. Transplantation, revascularization and integration of stem cell and progenitor cells in the central nervous system

Prudence Smith, M.D.-MCC
Pulmonary pathology. Cytopathology.

Leah Strickland-Marmol, M.D.-VA
My research interests include microvessel density in brain tumors, head and neck pathology, fungal infections in cancer patients, progression of premalignant breast lesions to carcinoma

Jianguo Tao, M.D.-MCC
My long-term goal of research is to define the critical molecular alterations that transform a normal cell into a cancer cell and to provide new avenues for development of more effective cancer therapies. I am interested in the signal transduction pathways that regulate cell
proliferation, differentiation and apoptosis, and in the mechanisms that couple these pathways to abnormal growth and cellular transformation in cancers. In particular I am interested in the signaling pathways responsible for malignant transformation by viral and cellular oncoproteins, and how the pathways involved in malignant transformation in leukemia and lymphoma. My current projects are focused on defining the roles of the MAP kinases, STAT-JAK and NFkappaB pathways in the pathogenesis of leukemia and lymphoma.

**Vesna Vrcel, M.D.-VA**  
Tumor induced angiogenesis, tumor angiogenesis and metastatic correlation in invasive breast carcinoma, Bcl-2 and association with microvessel density in breast cancer. c-erbB-2, p53 and nm23 gene expression in breast cancer, cathepsin D expression in breast cancer.

**Don E. Wheeler, M.D.-USF**  
Medical diseases of the kidney and liver; liver and kidney transplant pathology.

**Marzenna Wiranowska, Ph.D.-USF**  
Research interest is in Neuro-Oncology. The specific areas of research include the role of extracellular matrix in the brain during glioma invasion. Also, a biodistribution and the effect of chlorotoxin, a scorpion derived toxin, on glioma in vivo and in vitro are investigated.
Each resident rotation description contains a faculty member designated as “rotation director.” The rotation director is responsible for assigning the daily duties of the rotating resident(s), supervising the educational activities of the rotation, and completing the resident evaluations at the end of the rotation. Therefore, the residents are under the immediate supervision of their rotation director. For the purposes of resident education, all rotation directors at each hospital are under the supervision of the Program Coordinator for that institution. The Program Coordinator is responsible for overseeing the quality and balance of all residency education activities at that particular hospital (see below). The program coordinator attends all Residency Training Committee meetings. The residency program as a whole is overseen by the Residency Program Directors. All activities of the residency program and faculty are under the ultimate direction of the Department Chairman.

At the larger hospitals, the responsibility for making the daily grossing/autopsy/call schedule may be delegated by the Program Coordinator to the most senior resident assigned to the hospital.
Introduction

The Residency Training Committee of the Department of Pathology is responsible for the overall coordination and definition of the Residency Training Program in Pathology at the University of South Florida. Its members set policy, review resident performance, and coordinate all activities of the Department of Pathology Training Program. The following are members of the Residency Committee:

Residency Program Associate Director  
Dr. Jamie Shutter

Residency Program Director  
Dr. Santo Nicosia

Program Coordinator H. Lee Moffitt Cancer Ctr  
Dr. Barbara Centeno

Program Coordinator H. Lee Moffitt Cancer Ctr  
Dr. Hernani Cualing

Program Coordinator H. Lee Moffitt Cancer Ctr  
Dr. Ardeshir Hakam

Program Coordinator H. Lee Moffitt Cancer Ctr  
Dr. Prudence Smith

Program Coordinator J. A. Haley V.A. Hospital  
Dr. Michael Morgan

Program Coordinator Tampa General Hospital  
Dr. Enid Gilbert-Barness

Program Coordinator Tampa General Hospital  
Dr. Sivaselvi Gunasekaran

Program Coordinator Bay Pines Veterans Hospital  
Dr. Rehana Nawab

Program Coordinator Florida Blood Services  
Dr. German Leparc

Program Coordinator Medical Examiner's Office  
Dr. Vernard Adams

Program Coordinator University of South Florida  
Dr. Amyn Rojiani

Chairman Department of Pathology & Cell Biology  
Dr. Santo Nicosia

Chief Residents (3)  
Dr. Chetna Purohit 7/1/08 – 10/31/08
Dr. Justin Wagoner 11/1/08 – 2/28/09
Dr. Rahel Mathew 3/1/09 – 6/30/09

Scope of Responsibilities

The following responsibilities are those of the Residency Committee in the Department of Pathology.

1. Set Overall Goals and Objectives of the Program.
2. Define overall curriculum
3. Review and approve individual rotation content
4. Review resident applicant candidates
5. Provide evaluation and determine advancement of residents in the Department of Pathology
6. Approve the yearly resident rotation schedule
7. Determine long-term goals and direction of the residency-training program.

The committee meets a minimum of three times per year. The residency director or his/her designee chairs the meetings. Any member may bring agenda items for discussion. All items, changes in policy, or implementation of new protocols require a majority vote by the members. Any coordinator can, if they are unable to attend, send a representative as a voting member. The meetings will follow Robert's Rules of Order.
RESPONSIBILITIES OF PROGRAM COORDINATOR

Introduction

A Program Coordinator is assigned at each of the major institutions that participate in the education and training of the Department of Pathology and Cell Biology Residents of the University of South Florida. They assure that there is an adequate and balanced educational experience at their institution.

Duties of the Program Coordinator

1. Oversee the educational experience of all residents at the institution with which the coordinator is affiliated.

2. Assure that there is a balance between service and teaching.

3. Protect all segments of each rotation at the institution.

4. They or a designee provide on-going feedback to the resident throughout the rotation. They also review with the resident their written final evaluation at the end of the rotation.

5. If resident evaluations are accomplished by all faculty at the institution, the coordinator or a designee should chair the evaluation meeting and assure the evaluation is critical, constructive, and fair.

6. Maintain complete, current, and accurate documentation of the rotations at their institute including goals, skills, objectives and requirements.

7. Serve as a member of the USF Department of Pathology and Cell Biology Residency Training Committee.

Current Program Coordinators

The following institutions currently have Program Coordinators who are members of the Residency Committee:

- H. Lee Moffitt Cancer Center: Dr. Barbara Centeno
- H. Lee Moffitt Cancer Center: Dr. Hernani Cualing
- H. Lee Moffitt Cancer Center: Dr. Ardeshir Hakam
- H. Lee Moffitt Cancer Center: Dr. Prudence Smith
- Tampa General Hospital: Drs. Sivaselvi Gunasekaran & Enid Gilbert-Barness
- James A. Haley Veterans Hospital: Dr. Michael B. Morgan
- Florida Blood Services: Dr. German Leparc
- Bay Pines Veterans Hospital: Dr. Rehana Nawab
- Medical Examiner's Office: Drs. Vernard Adams

As institutions are added or deleted, the members of the Department of Pathology Residency Training Committee may change.
RESPONSIBILITIES OF RESIDENT ADVOCATE

Introduction

The Resident Advocate is a Faculty Member of the University of South Florida Department of Pathology and Cell Biology. Their responsibility is to assist the resident initially in adapting to the program and later to function as a mentor and advisor for the resident.

Process of Advocate Selection

Initially residents are assigned to interested faculty. The resident at any point can elect to select another resident advocate although this is generally discouraged. This may be done with the assistance of their current resident advocate. In this way, as the resident's goals and objectives change, the advocate may change.

Duties of Resident Advocate

1. The advocate should initially provide assistance in helping the resident adjust to this pathology program. Questions should be answered and advice given. They should provide help with the transition of medical student to resident or resident in another program to the USF Pathology Program.

2. The advocate should provide counsel to the resident, assisting them with problems or issues which the resident or advocate feels are important to the residents’ development. These include but are not limited to selection of rotations, career selection, and assistance with positions after leaving the program. Resident progress including rotation evaluations should be reviewed a minimum of twice per year.

3. The advocate should provide a mentoring influence, encouraging the resident to excel in all areas of the program.

4. The advocate should encourage residents to pursue a research interest, should seek out other faculty members for support, and provide guidance to achieve this goal.

Implementation

When the resident initially joins the program, the advocate should schedule a session with the resident and assure that the resident is adjusting to the program. They should meet on regular and initially frequent intervals to assure that the transition of the resident to the USF Department of Pathology and Cell Biology is proceeding smoothly.
RESIDENTS

JEFFREY AUFMAN, M.D.
JEREMY BOWERS, M.D.
WILLIAM BULKELEY, M.D.
KENNETH CALDER, M.D.
NICOLE DeMERS, M.D.
EVITA HENDERSON, M.D.
RAHEL MATHEW, M.D.
PATRICIA McNAB, M.D.
OMIE MILLS, M.D.
CHETNA PUROHIT, M.D.
BRIAN QUIGLEY, M.D.
LESLIE TURNER, M.D.
JUSTIN WAGONER, M.D.
XIAOHUI ZHANG, M.D.

ADVOCATE

RAMON SANDIN, M.D.
DON WHEELER, M.D.
NAZEEL AHMAD, M.D.
ARDESHIR HAKAM, M.D.
LOVELEEN KANG, M.D.
KAARON BENSON, M.D.
LEAH STRICKLAND-MARMOL, M.D.
JANE L. MESSINA, M.D.
STEVEN MASTORIDES, M.D.
RAMON SANDIN, M.D.
ARDESHIR HAKAM, M.D.
MICHAEL MORGAN, M.D.
JANE L. MESSINA, M.D.
AEJAZ NASIR, M.D.
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY
RESIDENCY TRAINING PROGRAM
GRIEVANCE PROCESS

Introduction:

This grievance process is a departmental procedure to be used for addressing issues where a Resident feels that they have been treated unfairly and seeks resolution. This policy is in accord with all University regulations, as defined by the House Office Policy manual for residents in the University of South Florida College of Medicine.

If a resident expresses a concern regarding their treatment, workload, assigned duties or other issues, they have the ability to contact any of the following individuals:

(1) Chairman of the Department of Pathology and Cell Biology (Dr. Santo Nicosia)
(2) Residency Directors (Dr. Jaime Shutter or Dr. Santo Nicosia)
(3) Chief Residents in Pathology (3)
(4) Resident Advocate
(5) Program Coordinator of the Site that they are currently assigned to

The resident can use their judgment in whom they feel is appropriate and whom they feel comfortable speaking with. The program does not determine whom the resident needs to speak to, and is meant to encourage dialogue with any of these individuals and the resident. After the issue is presented, the facts regarding the allegation are gathered, a small group of individuals are then convened to discuss the issues in further depth. At all times strict confidentiality is maintained. It is the understanding that unless the resident gives permission, other individuals are not involved. During all discussions an attempt is made, if appropriate, to involve the Resident Advocate. At the end of these sessions, if the resident is not satisfied with the outcome, they are free to proceed with the Residency Grievance Process as outlined in the Resident Handbook College of Medicine University of South Florida.
SENIOR RESIDENT COMMITTEE APPOINTMENTS

Introduction and Objectives

Resident participation as committee members or committee chairmen is an important aspect of Pathology training and practice. This involvement provides a leadership role by Pathologists in areas of University and Hospital functions.

A portion of the management experience for senior level residents is participation on committees at the University of South Florida and its affiliated hospitals. This experience will accomplish the following objectives.

1. Demonstrate the committee structure in the medical environment.
2. Show the interaction of pathology with other medical specialties
3. Provide a forum by which senior level residents will be exposed to the process of committee dynamics and function.

Participating Residents

PGY 3 and PGY 4 pathology residents will participate on committees. The appointments will be for a period of one year, July 1 - June 30. Appointments will be made with the recommendation of the Chief Residents, and the Directors of the Residency Training Program. Their recommendations will be forwarded to the appropriate person for committee appointment. Once an appointment has been made, attendance at all meetings is mandatory.

Approved Committee Appointment

H. Lee Moffitt Cancer Center Surgical Case & Blood Utilization Review Committee
H. Lee Moffitt Cancer Center Quality Assurance Committee
H. Lee Moffitt Cancer Center Infection Control Committee
James A. Haley Veterans' Hospital Transfusion Committee
James A. Haley Veterans' Hospital Tissue Committee
James A. Haley Veterans' Infection Control Committee
University of South Florida Year 2 Medical Student Integrated Pathology Committee
SENIOR RESIDENT COMMITTEE APPOINTMENTS – 2008/2009

H. Lee Moffitt Cancer Center Surgical Case & Blood Utilization Review Committee

    Chetna Purohit, M.D.
    Evita Henderson, M.D.

H. Lee Moffitt Cancer Center Quality Assurance Committee

H. Lee Moffitt Cancer Center Infection Control Committee

James A. Haley Veterans’ Hospital Transfusion Committee

James A. Haley Veteran’s Hospital Tissue Committee

    Leslie Turner, M.D.

James A. Haley Veterans’ Hospital Infection Control Committee

    Rahel Mathew, M.D.

University of South Florida Year 2 Medical Student Integrated Pathology Committee

    Rahel Mathew, M.D.
    Chetna Purohit, M.D.
    Justin Wagoner, M.D.

University of South Florida Pathology Residency Training Committee

    Rahel Mathew, M.D.
    Chetna Purohit, M.D.
    Justin Wagoner, M.D.
EVALUATION PROCESS

The continued success of the department depends on continuous, thorough, and fair evaluation of all components of the program. This includes regular assessment of the performance of residents, faculty, and individual rotations. The following summarizes our current evaluation process. Residents are evaluated at least four times a year through formal evaluation at the end of each rotation. In addition, their overall performance is reviewed annually by one of the Program Directors. When each resident completes the program, a final summary evaluation of his or her performance is completed. Likewise, faculty and rotations should be evaluated by the residents. The resident’s evaluation of the faculty is an essential part of their yearly evaluations by the Chairman, as well as important data required for the faculty Promotion and Tenure process.

<table>
<thead>
<tr>
<th>EVALUATION</th>
<th>PROCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>General resident evaluation</td>
<td>Filled out every rotation</td>
</tr>
<tr>
<td>Competency checklist</td>
<td>Filled out every core rotation - must be distributed by Sylvia along with above</td>
</tr>
<tr>
<td>Medical student evaluations</td>
<td>Filled out at end of each block</td>
</tr>
<tr>
<td>RISE</td>
<td>Results now available by end of June</td>
</tr>
<tr>
<td>Annual resident evaluation</td>
<td>Filled out with resident and program director</td>
</tr>
<tr>
<td>360° evaluation by ancillary personnel</td>
<td>Filled out at end of SP-2 and CP-2 at MCC-resident/attending distributes &gt;5 to non-physician laboratory employees</td>
</tr>
<tr>
<td>Formal lecture evaluations</td>
<td>Plate Rounds-VI and CP-2 MCC Grand Rounds-PGY2 and PGY4’s Plate Rounds-MI VA</td>
</tr>
<tr>
<td>Research day presentation evaluation</td>
<td>Evaluation on Research day</td>
</tr>
<tr>
<td>Portfolio</td>
<td>Resident-created document detailing practice based learning and improvement in AP or CP subject</td>
</tr>
</tbody>
</table>
FORMS TO BE FILLED OUT BY FACULTY.

The Resident Evaluation Form (REF) should be completed only by the attending faculty member(s) responsible for rotation. The form should be completed by the rotation director, with the input of any other faculty the resident had contact with during the rotation. At the discretion of the rotation director, a mid-rotation REF may also be completed. Specifically, if at the mid-point of the rotation the director feels the resident is in danger of failing the rotation, a mid-cycle REF MUST be completed. A REF must be filled out for each resident on the rotation. The REF should be reviewed with the resident by the attending pathologist responsible for the rotation prior to its conclusion and the resident should sign it to acknowledge review only. The forms should be returned to Sylvia Beacham no later than two weeks after completing rotation. All forms are sent by Sylvia Beacham to the Program Director, who may then forward fair to poor evaluations to the resident’s advocate. Fair to poor evaluations must be carefully reviewed by the resident's advocate and the residency director with appropriate remedial measures. Specific remedial measures are at the discretion of the RTC.

The Competency Checklist is a list of the knowledge, skills, and/or attitudes that the resident is expected to demonstrate by the end of the rotation. The rotation directors have crafted unique forms for each rotation. This form is new for the academic year beginning July 2002. This list should be given to residents at the beginning of the rotation to guide their studies and performance. It will be completed by the rotation director at the end of each rotation.

Excellent rotation evaluations should also be examined for their transferable qualities to weaker rotations.

Annual Evaluation Form (AEF)

At the end of the academic year, and preferably at mid-year as well, each resident meets with one of the Program Directors. At this meeting, an evaluation is performed appraising the resident’s performance on rotations thus far, their progress in the area of research and publications, their performance on the in-service exam, conference attendance, etc. (see form below.) If desired, the resident’s advocate may attend this meeting.

Upon completion of the program, the Program Director will review all evaluation materials in the resident’s file and compose a final summary evaluation of their performance. Special attention is given to the matter of the resident’s ability to perform tasks necessary for the routine practice of pathology.

In summary, the review of the residency, residents, and staff is an important continual process necessary for the continued improvement of the program as a whole. Your input is important.

FORMS TO BE FILLED OUT BY RESIDENTS:

The Faculty Evaluation Form (FEF) should be filled out anonymously by each resident at the end of each rotation. A form should be filled out for each attending involved in the rotation. The forms should be returned to Christine Currier no later than 2 weeks after completing rotation. These forms will be reviewed by the Residency Program Director on an annual basis, per ACGME requirements. The FEF will then be kept on file and confidential in the Department of Pathology office. A copy of the final form will be kept in the faculty member's permanent file and should be reviewed by the chairman with the faculty member at the time of the annual faculty evaluations. The chairman must carefully review poor evaluations. Specific
remedial measures are at the discretion of the chairman.

The Rotation Evaluation Form (REF) should be filled out by each resident at the end of each rotation. They may be, but are not required to be, signed and dated by the resident. The forms should be returned to Sylvia Beacham within 2 weeks of completing rotation. At the beginning of July, the ROF for the past 12 months will be pulled by Sylvia Beacham who will compile data, transcribe comments verbatim and distribute typed summaries to the Residency Review Committee. The RTC will be responsible for reviewing the ROF Summaries. The summaries will be sent to the attending pathologist in charge of the rotation within 14 days of the Committee's review. A copy of the final form will be kept on file in the Department of Pathology office and available for review by faculty and residents. Poor rotation evaluations must be carefully investigated for chronic problems and remedial measures are at the discretion of the RTC.

Annual Evaluation of the Program and Faculty is completed yearly by all PGY2 and above residents during the orientation session. This is used to rate the effectiveness of the teaching program and faculty and is used to continually update the quality of the program.

PLEASE NOTE THAT ALL EVALUATIONS ARE ONLINE. SYLVIA BEACHAM IS RESPONSIBLE FOR EMAILING THE WEBSITE TO ALL RESIDENTS, FELLOWS AND FACULTY MEMBERS FOR COMPLETION OF THE EVALUATION(S) BEFORE THE END OF EACH ROTATION. THE WEBSITE IS LOCATED AT

http://www.hsc.usf.edu/housestaff/pathology.html
University of South Florida  
Department of Pathology and Cell Biology  
Pathology Resident Evaluation Form

**Name:** ______________________________________________________ **PGY:** __________

**Rotation & Location:**___________________________________________

**Dates of Rotation:**___________________________________________

<table>
<thead>
<tr>
<th><strong>Patient care &amp; clinical responsibilities:</strong></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caring &amp; respectful behaviors</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Informed decision making</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Case management &amp; planning</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Performance of procedures</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Preventive health knowledge</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Work within the team</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Proper case evaluation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Progressive responsibility</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Diagnostic ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Specimen handling</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Medical knowledge:</strong></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>General medical Knowledge</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Investigatory &amp; analytical thinking</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Progressive knowledge improvement</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Practice based learning:</strong></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progressive practice improvement</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Use of recent scientific studies</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Use of information technology</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>Teaching ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>
### Interpersonal communication skills with:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Technical/Clerical</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
</tbody>
</table>

### Professionalism:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethically sound practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Respectfulness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Motivation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Response to criticism</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
</tbody>
</table>

### System based practice

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand interaction of the practice within the larger system</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>Knowledge of practice &amp; delivery system</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>Cost effective practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
</tbody>
</table>

### Overall evaluation:

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Below average</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

Strengths: __________________________________________________________
____________________________________________________________________
____________________________________________________________________

Weaknesses: __________________________________________________________
____________________________________________________________________
____________________________________________________________________

Recommendations: _____________________________________________________
____________________________________________________________________
____________________________________________________________________

Number of days absent from rotation: ________________

Faculty: ____________________________      Resident: ____________________________
          (acknowledges review)

Date: ____________________________

Please return this form to Sylvia Beacham, MD Box 11 within 2 weeks of completion

All evaluations are strictly confidential

University of South Florida
# Department of Pathology and Cell Biology
## ROTATION EVALUATION FORM

### Rotation and Location:

### Attending Physician(s) in charge of rotation:

### Year of Rotation:

<table>
<thead>
<tr>
<th>(Key: 1-weakly disagree, 2-disagree, 3-agree, 4-strongly agree, N/A-not applicable)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The objectives and expectations of the rotation were clearly defined and distributed on the first day of the rotation.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>2. The rotation was structured and organized, and covered all stated objectives.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>3. The teaching conferences were adequate.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>4. The teaching and service work were balanced and integrated.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>5. The resident was motivated to exceed minimum requirements.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>6. The resident was exposed to new developments.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>7. The resident was prepared for clinical and/or academic practice.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>8. The resident was allowed to assume progressive responsibility.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>9. The resident's input was respected and welcomed.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>10. The number of residents on the rotation was adequate.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>11. The attendings were accessible to the resident and motivated to teach.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>12. There was adequate time to prepare before presenting to the attending.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>13. I would recommend this rotation to another resident.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>NA</td>
</tr>
</tbody>
</table>

### Overall Evaluation of Rotation:

53
<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

The strengths of the rotation include?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The weaknesses of the rotation include?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Additional Comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please return to Sylvia Beacham, MDC Box 11, within 2 weeks of completing rotation. All evaluations are strictly confidential.
University of South Florida  
Department of Pathology and Cell Biology  

FACULTY EVALUATION FORM  
(Fill out one form per faculty member)  

Attending Physician:  

Rotation and Location:  

Dates of Rotation:  

(key: 1-poor, 2-below average, 3-average, 4-above average, 5-excellent, NA-not applicable)  

<table>
<thead>
<tr>
<th>Professional:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Medical Knowledge</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>2. Diagnostic Ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>3. Teaching Ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Motivation/Enthusiasm</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>2. Integrity</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>3. Fairness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>4. Communication</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>4. Response to Criticism</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationships/Interpersonal:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Faculty</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>2. Residents</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
<tr>
<td>3. Technical/Clerical</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
</tr>
</tbody>
</table>

General Comments: (Key: 1-strongly disagree, 2-disagree, 3-agree, 4-strongly agree, N/A-not applicable)  

1. The attending allowed the resident to assume progressive responsibility.  
   1 2 3 4 NA  

2. The resident was encouraged to present his or her diagnosis before the attending.  
   1 2 3 4 NA  

3. The attending initiated further discussion of relevant features of cases.  
   1 2 3 4 NA  

4. The resident had significant input in the diagnosis and workup of the patient.  
   1 2 3 4 NA  

5. The attending encouraged the resident to be involved in research.  
   1 2 3 4 NA
6. The attending encouraged the resident to attend local and national conferences, whenever possible. 1 2 3 4 NA

7. The attending treated the resident with respect. 1 2 3 4 NA

8. The attending pathologist encouraged and expected the resident to attend mandatory conferences. 1 2 3 4 NA

9. The attending was accessible and welcomed the resident's questions and comments. 1 2 3 4 NA

10. I would like to work with this attending physician again. 1 2 3 4 NA

**Overall Evaluation of Faculty Member:**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

**Major Strengths of faculty member:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Major Weaknesses of faculty member:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Additional Comments:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please return to Christine Currier, MDC Box 11, within 2 weeks of completing rotation.
All evaluations are strictly confidential.
University of South Florida  
Department of Pathology and Cell Biology  
ANNUAL RESIDENT EVALUATION FORM

Resident: __________________________________________  PGY year: ____________________________
Rotations completed this year: ____________________________________________________________
Date form completed: __________________________________ Evaluator: _________________________

I. ROTATION EVALUATION SUMMARY  
(Key: 1-Poor, 2-below average, 3-average, 4-above average, 5-excellent, N/A-not applicable)

<table>
<thead>
<tr>
<th>Category</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient care</td>
<td></td>
</tr>
<tr>
<td>Medical knowledge</td>
<td></td>
</tr>
<tr>
<td>Practice-based learning and improvement</td>
<td></td>
</tr>
<tr>
<td>Interpersonal communication</td>
<td></td>
</tr>
<tr>
<td>Professionalism</td>
<td></td>
</tr>
<tr>
<td>Systems-based practice</td>
<td></td>
</tr>
</tbody>
</table>

Major strengths:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Major weaknesses:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

II. INSERVICE EXAMINATION SCORES

Score/compared to peer group: __________________
Scores on rotations taken so far in residents/compared to peer group:

<table>
<thead>
<tr>
<th>Rotation</th>
<th>Score</th>
<th>National avg peers</th>
</tr>
</thead>
<tbody>
<tr>
<td>SURG PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CYTO PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FOREN PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CLIN CHEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HEME PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MICRO PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRANS MED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IMMUN PATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LAB ADMIN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SPEC TECH</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Resident’s score

National avg peers

III. CONFERENCE ATTENDANCE (% required departmental conferences): _____________

IV. OVERALL EVALUATION:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

V. ADDITIONAL DATA
<table>
<thead>
<tr>
<th>A. COMMITTEE APPOINTMENT(S) (IF SENIOR):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>B. PUBLICATIONS/PRESENTATIONS:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C. RESEARCH:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>D. SUMMARY OF LEAVE DAYS TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>VACATION</td>
</tr>
<tr>
<td>ADMINISTRATIVE</td>
</tr>
<tr>
<td>SICK</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E. NUMBER OF AUTOPSIES PERFORMED</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>F. MOONLIGHTING EXPERIENCE</th>
</tr>
</thead>
</table>

VI. GOALS FOR UPCOMING ACADEMIC YEAR

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

VII. SUGGESTED REMEDIATION, IF NEEDED

________________________________________________________________________
________________________________________________________________________

Signatures

Resident Residency Director Residency Advisor
PATHOLOGY RESIDENT LECTURE PRESENTATION
EVALUATION FORM

<table>
<thead>
<tr>
<th>Resident:</th>
<th>Postgraduate Year:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>

(key: 1-poor, 2-below average, 3-average, 4-above average, 5-excellent, NA-not applicable)

- Demonstration of basic science knowledge: 1 2 3 4 5 NA
- Demonstration of technical knowledge: 1 2 3 4 5 NA
- Review of Literature/Critical Thinking: 1 2 3 4 5 NA
- Organization of presentation: 1 2 3 4 5 NA
- Clarity of presentation: 1 2 3 4 5 NA
- Stimulation of thinking and interest: 1 2 3 4 5 NA
- Responsiveness to questions: 1 2 3 4 5 NA
- Quality of audiovisual aids: 1 2 3 4 5 NA

Overall Evaluation: (comment required on evaluation below average)

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

Comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Faculty
Date

Please complete and return form to Sylvia Beacham, MDC 11, as soon as possible.
All evaluations are strictly confidential.
University of South Florida College of Medicine  
Department of Pathology and Cell Biology

PATHOLOGY RESIDENT RESEARCH PRESENTATION  
EVALUATION FORM

Resident:          Postgraduate Year:

Date:              

(key: 1-poor, 2-below average, 3-average, 4-above average, 5-excellent, NA-not applicable)

1. Hypothesis formulation 1 2 3 4 5 NA
2. Demonstration of basic science knowledge 1 2 3 4 5 NA
3. Demonstration of technical knowledge 1 2 3 4 5 NA
4. Review of Literature/Critical Thinking 1 2 3 4 5 NA
5. Design of Experiment 1 2 3 4 5 NA
6. Data Collection 1 2 3 4 5 NA
7. Data Analysis and Interpretation 1 2 3 4 5 NA
8. Organization of presentation 1 2 3 4 5 NA
9. Clarity of presentation 1 2 3 4 5 NA
10. Stimulation of thinking and interest 1 2 3 4 5 NA
11. Responsiveness to questions 1 2 3 4 5 NA
12. Quality of audiovisual aids 1 2 3 4 5 NA

Overall Evaluation: (comment required on evaluation below average)

Poor | Fair | Average | Good | Excellent

Comments:

Please check the appropriate box:

[ ] Faculty  [ ] Resident

Please complete and return form to Sylvia Beacham, MDC Box 11.  
All evaluations are strictly confidential.
Physician Name: ____________________________________________________________

Based on your own personal observations and interactions with the selected physician, please consider the following issues and rate the selected physician's professionalism. Use the scale below:

1= Unacceptable, 2=Marginally Acceptable, 3=Acceptable, 4=Exceeds Standard, 5=Outstanding

<table>
<thead>
<tr>
<th>Issue</th>
<th>Rating 1</th>
<th>Rating 2</th>
<th>Rating 3</th>
<th>Rating 4</th>
<th>Rating 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treats all patients and staff with respect, dignity, and consideration.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Demonstrates clinical experience and commitment to excellence.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Respects the confidentiality of patient information.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Understands and demonstrates a commitment to ethical principles pertaining to informed consent.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Understands diversity issues and treats all patients/staff with respect and consideration.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Attendance is punctual and appropriate.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Maintains professional appearance &amp; decorum</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Provides continued effort until patient care needs are completed or responsibility is transferred.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Finishes medical records promptly.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Responds appropriately to feedback.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Demonstrates interest in helping others learn.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Meets assigned responsibilities.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Is always honest and believable.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

14. You can make additional comments in the box below.
I. General Principles

These policies are complementary to the USF House Officer Personnel policies agreed to when the contract is signed. The following policies reiterate and expand upon these policies as they pertain to the Pathology Department. An official copy of the House Staff Policy Manual can be obtained from Sylvia Beacham or online at www.hsc.usf.edu, link College of Medicine, click Education, and click Graduate Medical Education. All official matters regarding house staff policies are delineated through the Office of Graduate Medical Education and fully defined in the USF house staff manual.

II. Vacation/Sick Leave

A. Each resident shall be credited with two (2) weeks or 10 working days starting their first year; three (3) weeks or 15 working days per year are provided thereafter. In general, vacation leave is to be taken in increments of a full week. Taking vacation during 1-month rotations is discouraged. Vacation leave days may not be carried over from one appointment year to the next, and no payment for unused leave days will be made upon terminating a training period.

B. A total of 9 days of sick leave per year are allowed each resident; in addition one day of sick leave per year are credited to the sick leave pool.

C. Only five (5) days of unused sick leave can be carried over to the next appointment year; for maternity/paternity purposes only. Unused sick leave will not be paid upon termination of a training period for any cause.

D. Each resident must arrange coverage for his or her service responsibilities when vacation is taken. This may be in the form of a "trade" with other residents. All such arrangements must be approved in advance by the attending whose service is affected and the Program Coordinator of the institution.

E. The following method will be used to report vacation/sick leave:

1. The vacation/sick leave request form is to be filled out and turned in as soon as vacation is planned; during Surgical Pathology rotations this is to be no later than the beginning of the rotation. This form must be co-signed by the attending heading the rotation. A leave request form is included in the following pages. This may be copied for residents use.
2. No greater than one consecutive week of vacation leave in one rotation should be taken, unless it is a part of maternity leave.

3. At the end of the rotation, the resident evaluation form will include a section on whether the resident has taken vacation/sick leave during the rotation.

4. When a resident uses sick leave, the rotation director at the assigned hospital and Sylvia Beacham should be notified by telephone that day. Upon returning to work, the vacation/sick leave form is filled out and turned in to Sylvia Beacham in the Pathology and Cell Biology Department at USF.

F. Administrative (Professional) leave

Administrative leave is available to residents for professional activities approved by the Program Director and the Graduate Medical Education Office. Final approval of leave request(s) rests on the authority of the departmental chair. Professional activities include active participation and presentation(s) at specialty meetings.

III. Family and Medical Leave

A. The policies for family and medical leave are the same as stated in the House Office Personnel Policy booklet, briefly:

1. **Parental.** Each resident is allowed up to twelve (12) weeks of uncompensated parental leave. Individuals must apply for parental leave in advance and obtain approval from their Program Director and the GME Office. Individuals may utilize accumulated sick or vacation leave as continued compensation during parental leave under the conditions specified for those benefits. No other compensation is available for parental leave. If both parents are USF residents, a combined total of 12 weeks of parental leave is allowed as prescribed by FMLA.

   Absences from the residency in excess of that allowed by the RRC and Board must be made up in order to fulfill the requirements for completion set forth by the ACGME.

2. As soon as it is feasible, the department should be notified of a resident's pregnancy so that a review of her remaining rotations and any necessary changes may be made. In general, pregnant residents are expected to perform the usual duties of the rotations to which they are assigned, unless excused for medical or other reasons by their physician. Residents may be excused from assigned rotations and reassigned if the attending pathologist on that rotation believes the duties of the rotation pose an undue risk to a pregnant woman or child.
3. **Child Care.** Upon written approval of the Program Director and GME Office, uncompensated leave for childcare purposes up to a maximum of six months shall be granted. The leave shall begin no more than two weeks before the expected adoption or delivery date. When certified by a licensed physician, sick leave credits may be used for any illness caused or contributed to by pregnancy or delivery. Vacation leave credits may also be used in conjunction with childcare leave. (See sections on Parental, Sick, and Vacation Leave.)

**IV. Leave without pay**

Upon written request of a resident, the Program Director may grant a leave of absence without pay for a period not to exceed six (6) months, if it is determined that granting such leave would be in the best interest of the University and House Officer.

**All leave in excess of 4 weeks per year must be made up at the end of the resident’s training.**

**V. Dress Code**

a. The purpose of the dress code is to maintain high standards of dress, hygiene, grooming and the personal appearance of the staff members, which are essential elements in our daily relations with patients, families, and visitors in assuring a professional, business-like representation.

b. Without unduly restricting individuals’ tastes, it is our policy to require personal cleanliness, good grooming and appropriate dress while staff members are on duty every day of the week and to establish a mechanism by which uniforms will be provided to employees in positions meeting designated criteria.

c. Operational needs within a department may require specific departmental policies, but in all cases standards must be in compliance with infection control and safety guidelines. In departments where staff members will have contact with patients, uniforms may be required. In departments where uniforms are not required, staff members are expected to use good judgment in selecting the clothes they wear on the job. Male staff members must wear neckties except where specific uniforms dictate otherwise.

d. Extreme styles should be avoided:
   - Revealing clothing such as midriff tops, tank tops, shorts, rompers, beachwear, flip-flops, cut-offs, see-through clothing, or any street clothes that expose the body to a degree that represents poor taste or unprofessional appearance.
   - Workout clothing such as sweat suits, spandex exercise wears, jogging suits, sweat pants, or other athletic wear.
   - T-shirts, sweat shirt, or any other clothing with commercial logos, slogans, or other art or designs that might be offensive to others.
   - Any clothing that does not properly fit (excessively small or large for the wearer) and/or exposes the wearer to any added risk of injury.
 VI. Licensure/Accreditation

A. All residents must be ACLS/BCLS certified, according to the bylaws of the Health Sciences Center Trust Fund prior to their start date of July 1.

B. All residents must apply for licensure/registration with the Florida Department of Professional Regulation as soon as they are eligible (after the first year of residency training), according to the bylaws of the Health Sciences Center Trust Fund. Applications are available from the Housestaff Office at TGH, or by writing the DPR.

VII. Senior Residents

A. A senior resident at each institution is that resident with the most seniority (i.e. years of training). An acting senior resident will be assigned among residents of equal seniority. That person is usually responsible for the following:

1. Assisting the head of anatomic pathology in making out the weekend call schedule at the beginning of the rotation, at which time resident vacation requests must be submitted.

2. Assisting the head of anatomic pathology in the making of the daily grossing/autopsy schedule for residents.

VIII. Travel Expense Policy

Any request for reimbursement of travel expenses must be submitted within ninety (90) days after the expense was paid or incurred. Any exception to this ninety (90) day limit must be approved by the Dean of the College of Medicine/VP Health Sciences or the Associate Dean, Finance, Administration, and Technology. If a request is submitted after the ninety (90) day limit and has approval for payment by the Dean of the College of Medicine/VP Health Sciences, the request will be paid through the accounts payable process provided it has not exceeded the IRS 120-day limitation. However, if a request approved by the Dean of the College of Medicine/VP Health Sciences is submitted after the IRS limit of 120 days from the date the expense was paid or incurred, the reimbursement will be includable in an employee’s gross income, reported as wages on Form W-2 and subject to withholding and payment of employment taxes. Non-employees will be reimbursed and issued a Form 1099. If the request for reimbursement is submitted after 180 days from incurrence, the expense will not be reimbursed.
5. Business Expense (Other than Travel)

Any request for reimbursement of business-related expenses must be submitted within ninety (90) days after the expense was paid or incurred. Any exception to this ninety (90) day limit must be approved by the Dean of the College of Medicine/VP Health Sciences or the Associate Dean, Finance, Administration, and Technology. If a request is submitted after the ninety (90) day limit and has approval for payment by the Dean of the College of Medicine/VP Health Sciences, the request will be paid through the accounts payable process provided it has not exceeded the IRS 120-day limitation. However, if a request approved by the Dean of the College of Medicine/VP Health Sciences is submitted after the IRS limit of 120 days from the date the expense was paid or incurred, the reimbursement will be includable in an employee’s gross income, reported as wages on Form W-2 and subject to withholding and payment of employment taxes. Non-employees will be reimbursed and issued a Form 1099. If the request for reimbursement is submitted after 180 days from incurrence, the expense will not be reimbursed.

When reimbursing individuals for expenses paid out-of-pocket, this policy requires the appropriate backup information such as the following:

6. Original invoice with zero balance (with proof of payment made by individual requesting reimbursement).
7. Original cash register receipt or other receipt.
8. Copy of front and back of canceled check.
9. Copy of bank statement showing cleared check.
10. Copy of credit card receipt or credit card statement.

Statements showing payments made or paid receipts are preferred. If it is not possible to obtain these than a copy of the canceled check or bank statement is acceptable.
USF HEALTH
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY
RESIDENT LEAVE REQUEST

PLEASE PRINT

DATE SUBMITTED: _______________________

NAME _________________________________ SIGNATURE __________________________

DATE LEAVE BEGINS ________________ DATE LEAVE ENDS _______________________

TOTAL NUMBER OF DAYS ____________ (OR) TOTAL NUMBER OF HOURS _____________

CHECK TYPE OF LEAVE USED

_____ ADMINISTRATIVE       _____ SICK       _____ VACATION

OTHER (SPECIFY) ____________________________________________________________

WHO WILL BE COVERING YOUR RESPONSIBILITIES?

NAME ____________________________ SIGNATURE __________________ DATE __________

____________________________________ DATE ______________
SUPERVISING FACULTY/STAFF - SIGNATURE

____________________________________ DATE ______________
CHIEF OF SERVICE - SIGNATURE

____________________________________ DATE ______________
RESIDENCY DIRECTOR - SIGNATURE

Return the completed form to Sylvia Beacham, MDC Box 11
USF HEALTH
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY
RESIDENT BOOK ORDER REQUEST FORM

PLEASE PRINT
NAME: ___________________________ SIGNATURE: ___________________________

BOOK TITLE: ___________________________

ISBN: ___________________________

AUTHOR: ___________________________

PUBLISHER: ___________________________

EDITION OR YEAR PUBLISHED: ___________________________

ASCP MEMBERSHIP NUMBER: ___________________________

CAP MEMBERSHIP NUMBER: ___________________________

TOTAL AMOUNT OF BOOK $ ___________________________

Return the completed form to Sylvia Beacham, MDC Box 11
ALL BOOKS WILL BE ORDERED BY THE DEPARTMENT
Request for use of these funds must be received prior to June 1, 2009
Department of Pathology and Cell Biology
Pre-Travel Authorization Form

Please submit all brochures, registration forms, and title of abstract or poster along with your leave request. Prior approval of all trips is required for reimbursement, 30 days preferred.

REQUESTED BY: ___________________________ DATE: ___________________________

PURPOSE OF TRIP: ___________________________________________________________

________________________________________________________________________

LOCATION: _______________________________________________________________

TRAVEL DATES: ___________________________________________________________

<table>
<thead>
<tr>
<th>ESTIMATED EXPENSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>REGISTRATION FEE: $</td>
</tr>
<tr>
<td>AIRFARE: $</td>
</tr>
<tr>
<td>HOTEL EXPENSE: $200 Max per day: X (# of days) $</td>
</tr>
<tr>
<td>MEALS PER DIEM: $36.00 Max: X (# of days) $</td>
</tr>
<tr>
<td>OTHER &amp; MISC: Please specify: $</td>
</tr>
</tbody>
</table>

TOTAL ESTIMATED EXPENSES: $ ___________________________

APPROVAL: ___________________________ DATE: ___________________________

Santo V. Nicosia, M.D.

PLEASE CHECK ONE:

- [ ] DEVELOPMENT FUND:
- [ ] PI GRANT/RO:

Return completed form and requested information to Sylvia Beacham, MDC 11
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY
2008 - 2009 LIST OF RESIDENTS AND FELLOWS

Elise Arbefeville, M.D.  PGY-5  07/01/08 – 06/30/09
Forensic Pathology Fellow
Pager-332-9064
Email:

Jeffrey Aufman, M.D.  PGY-3  07/01/08 – 06/30/09
8336 Lucuya Way
Tampa, FL 33637
Cell (832) 524-9306  Pager-332 0488
Email: jaufman@health.usf.edu

Jeremy Bowers, M.D.  PGY-2  07/01/08 – 06/30/09
3325 Bayshore Blvd. Unit C-14
Tampa, FL 33629
495-4132  Pager-332-6867
Email: jbowers@health.usf.edu

William Bulkeley, III  PGY-1  07/01/08-06/30/09
10211 Courtney Palms Blvd. #201
Tampa, FL 33619
Cell (864) 933-3712  Pager-332-9077
Email:

Kenneth B. Calder, M.D.  PGY-2  07/01/08 – 06/30/09
802 East Lambright Street
Tampa, FL 33604
(407) 461-7031  Pager-332-6609
Email: kcalder@health.usf.edu

Nicole M. DeMers, M.D.  PGY-2  07/01/08 – 06/30/09
17109 Heart of Palms Drive
Tampa, FL 33647
903-7096  Pager-332-6787
Email: ndemers@health.usf.edu
Claudia Droc, MD
122 Lake Hobbs Road
Lutz, FL 33548
948-4488   Pager-332-6875
Email: cdroc@health.usf.edu
PGY-4 07/01/08 – 08/06/09
PGY-5 08/08/08 – 06/30/09
Cytopathology Fellow

Masoumeh Ghayouri, MD
16301 Turnbridge Court
Tampa, FL 33647
975-0099   Pager – 332-6122
Email: mghayour@health.usf.edu
PGY-5 07/01/08 - 6/30/09
Surgical Pathology Fellow

Naiel Ali Hafez, MD
Pager – 332-3138
Email:
PGY-5 07/01/08 – 06/30/09
Surgical Pathology Fellow

Evita Henderson, M.D.
10417 Tulip Field Way
Riverview, FL 33569
Cell: (803) 617-9510   Pager – 332-0485
Email: ehender1@health.usf.edu
PGY-3 07/01/08 – 06/30/09

Timothy McCardle, M.D.
30329 Grymes Drive
Wesley Chapel, FL
Cell (636) 326-1751   Pager – 332-9136
Email:
PGY-5 07/01/08-06/30/09
Dermatopathology Fellow

Patricia McNab, MD
2202 Country Club Court
Plant City, FL 33566
754-9492   Pager- 332-6794
Email: pmoody@health.usf.edu
PGY-2 07/01/08 – 06/30/09

Rahel Mathew, M.D.
18001 Richmond Place Drive #1232
Tampa, FL 33647
476-3705   Pager – 332-0746
Email: rmathew1@health.usf.edu
PGY-3 07/01/08 – 06/30/09
Chief Resident 03/01/09 – 06/30/09
Omie Mills, M.D.  
1615 52nd Drive West  
Palmetto, FL 34221  
(941) 722-2309 Pager – 332-9146  
Email: omills@health.usf.edu

Mojdeh Naghashpour, MD  
10420 N. McKinley Drive #8311  
(305) 610-3977 Pager-332-9214  
Email: 

Chetna Purohit, MD  
2562 Redwood Way  
Clearwater, FL 33761  
(727) 232-0562 Pager – 332-6373  
Email: cpurohit@health.usf.edu

Brian Quigley, M.D.  
4105 W. Coachman Avenue  
Tampa, FL 33611  
(314) 791-6854 Pager:-332-9109  
Email: bquigley@health.usf.edu

Elizabeth Sagatys, MD  
16102 Dowling Court  
Tampa, FL 33647  
975-9640 Pager-332-6527  
Email: esagatys@health.usf.edu

Thora S. Steffensen, MD  
700 S. Harbour Island Blvd. #321  
Tampa, FL 33602  
412-4927 Pager-332 -9738  
Email: tsteffen@health.usf.edu

Leslie Turner, M.D.  
8015 West Pocahontas Avenue  
Tampa, FL 33615  
249-7365 Pager – 332-0750  
Email: lpassmor@health.usf.edu

PGY-1  07/01/08 – 06/30/09

PGY-5  07/01/08 – 06/30/09  Hematopathology Fellow

PGY-4  07/01/08 – 10/31/08  Chief Resident

PGY-1  07/01/08 – 06/30/09

PGY-6  07/01/08 – 06/30/09  Hematopathology Fellow

PGY-7  07/01/08 – 06/30/09  Pediatric Pathology Fellow

PGY-3  07/01/08 – 06/30/09
Michael Justin Wagoner, MD  
PGY-4  
2072 Attache Court  
Clearwater, FL 33764  
(727) 642-2092  Pager – 332-6337  
Email: mwagoner@health.usf.edu

Chief Resident  
11/01/08 – 02/28/09

Xiaohui Zhang  
PGY-1  
6240 Ashbury Palms Dr.  
Tampa, FL 33647  
(813) 978-3110  Pager-332-9154  
Email: xzhang@health.usf.edu

07/01/07 – 06/30/08

07/01/08-06/30/09
DEPARTMENT OF PATHOLOGY AND CELL BIOLOGY

Main Pathology Office located in room **MDC 2040**.
Telephone number (813) 974-3133

<table>
<thead>
<tr>
<th>FACULTY</th>
<th>PHONE:</th>
<th>BEEPER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PROFESSORS:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Henry A. Azar, M.D.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emeritus</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Wenlong Bai, Ph.D.</strong></td>
<td>974-0563</td>
<td></td>
</tr>
<tr>
<td>USF College of Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>John U. Balis, M.D.</strong></td>
<td>962-0708</td>
<td></td>
</tr>
<tr>
<td>Emeritus</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Don Cameron, PhD</strong></td>
<td>974-9431</td>
<td></td>
</tr>
<tr>
<td>USF College of Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Jin Q. Cheng, PhD</strong></td>
<td>745-6915</td>
<td></td>
</tr>
<tr>
<td>H. Lee Moffitt Cancer Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Oncological Sciences</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Domenico Coppola, M.D.</strong></td>
<td>745-3275</td>
<td>256-4956</td>
</tr>
<tr>
<td>H. Lee Moffitt Cancer Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Oncological Sciences</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Peter Dawson, M.D.</strong></td>
<td>254-3336</td>
<td></td>
</tr>
<tr>
<td>Emeritus</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Neil Fenske, M.D.</strong></td>
<td>974-2854</td>
<td></td>
</tr>
<tr>
<td>USF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Internal Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Enid Gilbert-Barness, M.D.</strong></td>
<td>844-7565</td>
<td></td>
</tr>
<tr>
<td>Tampa General Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Raymond D. Harbison, M.S., Ph.D.</strong></td>
<td>974-3467</td>
<td></td>
</tr>
<tr>
<td>USF College of Public Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Don Hilbelink, Ph.D.</strong></td>
<td>974-9483</td>
<td></td>
</tr>
<tr>
<td>USF College of Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Patricia A. Kruk, Ph.D.</strong></td>
<td>974-0538</td>
<td></td>
</tr>
<tr>
<td>USF College of Medicine</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PROFESSORS (CONT.):

Jane L. Messina, M.D.
USF College of Medicine  974-0995  292-8615
745-3910

Lynn Moscinski, M.D.
H. Lee Moffitt Cancer Center
Department of Oncological Sciences
745-2241  256-4784

Santo V. Nicosia, M.D.
Chairman
USF College of Medicine
974-0529  256-4765

Michael Nolan, Ph.D.
USF College of Medicine
974-9416

Amyn M. Rojiani, M.D., Ph.D.
H. Lee Moffitt Cancer Center
Department of Oncological Sciences
974-8750 (Office)  271-7448
974-8742 (Lab) & 974-8743 (Lab)
745-2672  256-4966

David T. Rowlands, Jr., M.D.
Emeritus
974-0575

Samuel Saporta, Ph.D.
USF College of Medicine
974-9445

Paul Schmidt, M.D.
Florida Blood Services
977-5433

John A. Shively, M.D.
Emeritus
974-3133

Jeno Szakacs, M.D.
Emeritus

Myron Tannenbaum, Ph.D.
(727) 398-6661
Bay Pines V.A. Hospital

Curtis Wienker, Ph.D.
USF College of Arts and Science
974-6237
ASSOCIATE PROFESSORS:

Geza Acs, M.D., PhD. 745-2093  256-4949
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Vernard Adams, M.D. 272-5342
Hills. County Medical Examiners Office

Steven Agosti, M.D. 972-2000 X 6470  201-3848
James A. Haley Veterans Hospital

Nazeel Ahmad, M.D. 972-2000 X 7257  201-2207
James A. Haley Veterans Hospital

Orhan Arslan, M.D. 974-0636
USF College of Medicine

Kaaron Benson, M.D. 745-2228  256-4781
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

David Birk, PhD 974-8598
USF College of Medicine

Barbara Centeno, MD 745-2451  256-4954
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Hernani Cualing, MD, PhD 745-3914  256-4782
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Julian Dwornik, Ph.D. 974-9459
Emeritus

Bayzar Erkman-Balis 962-0708
Emeritus

Philip R. Foulis, M.D., M.P.H. 972-2000 X 4915  201-4903
James A. Haley Veterans Hospital

L. Frank Glass, M.D. 974-3744
USF College of Medicine
Department of Internal Medicine

Ardeshir Hakam, MD 745-1874  256-4957
H. Lee Moffitt Cancer Center
Department of Oncological Sciences
ASSOCIATE PROFESSORS (CONT.)

William E. Janssen, Ph.D.  
USF Department of Internal Medicine  
974-2271

Karl Muffly, Ph.D.  
USF College of Medicine  
974-9385

Ramon Sandin, M.D., M.S.  
H. Lee Moffitt Cancer Center  
Department of Oncological Sciences  
745-8451  256-4785

Don E. Wheeler, M.D.  
USF College of Medicine  
974-5192  208-0468

Marzenna Wiranowska, Ph.D.  
USF College of Medicine  
974-3289

ASSISTANT PROFESSORS:

Marilyn Bui, M.D., Ph.D.  
H. Lee Moffitt Cancer Center  
Department of Oncological Sciences  
745-4940  256-4953

Robert Engleman, Ph.D.  
All Children's Hospital  
(727) 892-4341

Jean Johnson, M.D.  
James A. Haley Veterans Hospital  
972-4673 X 6471  201-1094

Gabor Legradi, Ph.D.  
USF College of Medicine  
974-5956

Aejaz Nasir, M.D.  
H. Lee Moffitt Cancer Center  
Department of Oncological Sciences  
745-4270  256-4963

Hamid Rabb, M.D.  
USF College of Medicine  
Department of Internal Medicine  
974-2032

Jennifer Reed, M.D.  
James A. Haley Veterans Hospital  
972-2000  Ext. 6474

Mumtaz Rojiani, Ph.D.  
USF College of Medicine  
974-8742
ASSISTANT PROFESSORS (CONT.):

Jamie Shutter, M.D.
USF College of Medicine

Prudence Smith, M.D. 745-2943 256-4967
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Mei Sun, M.D. 745-6914
USF College of Medicine

Jianguo Tao, MD 745-3885 256-4786
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Vesna Vrcelj, M.D. 972-2000 X6469 201-2757
James A. Haley VA Hospital

Xiaohong (Mary) Zhang, Ph.D. 974-1288
USF College of Medicine

CLINICAL PROFESSORS:

Michael Morgan, M.D. 972-2000 X 6466 201-3768
James A. Haley Veterans Hospital

CLINICAL ASSOCIATE PROFESSORS:

Stephen Brantley, M.D. 844-4262
Tampa General Hospital

Irwin Browarsky, M.D. 844-4272
Tampa General Hospital

Americo A. Gonzalvo, M.D. 844-4265
Tampa General Hospital

Sivaselvi Gunasekaran, M.D. 844-4259
Tampa General Hospital

German Felix Leparc, M.D. (727) 568-5433 Ext.1161
Florida Blood Services

Steven Lewis, M.D. (561) 567-7111
Doctor's Clinic
Vero Beach, FL
CLINICAL ASSOCIATE PROFESSORS (CONT.):

Rehana Nawab, M.D. (727) 398-6661 Ext. 5824
Bay Pines V.A. Hospital

T. Y. Wang, M.D. (727) 398-9309 Ext 5509
Bay Pines V. A. Hospital

Robert Williams, M.D. 972-7100 Ext 7188
Quest Diagnostics

CLINICAL ASSISTANT PROFESSORS:

Jeanne Ackerman, M.D. (904) 424-5168
Bert Fish Medical Center

Jorge Arroyo, M.D. 870-4205
St. Joseph's Hospital

Andrew Borkowski, M.D. 972-2000 X 6468 201-4246
James A. Haley VA Hospital

Leszek Chrostowski, M.D. 272-5342
Hills. County Medical Examiners Office

Wayne Duer, Ph.D. 272-5342
Hills. County Medical Examiners Office

Shohreh Iravani, M.D. 745-2780 256-4959
H. Lee Moffitt Cancer Center
Department of Oncological Sciences

Loveleen Kang, M.D. 972-2000 X 6467 201-5625
James A. Haley VA

Jacqueline Lee, M.D. 272-5342
Hills. County Medical Examiners Office

Mayra Lopez-Cepero, Ph.D. (813) 253-3866 Ext. 1270
Lifelink

Buff Mair, M.D. (727) 568-5433 Ext. 1159
Florida Blood Services

Stephen Mastorides, MD 972-2000 X7525 201-1025
James A. Haley VA Hospital
CLINICAL ASSISTANT PROFESSORS (CONT.):

Leah Strickland-Marmol, M.D.  
James A. Haley VA Hospital  
972-2000 Ext. 4566  201-6972

Theodore Strickland, M.D.  
Bay Pines V. A. Hospital  
(727) 398-6661

Russell Vega, M.D.  
Sarasota Memorial Hospital  
(941) 361-6909

VOLUNTARY ASSISTANT PROFESSORS:

Laura Hair, M.D.  
Hillsborough County Medical Examiners Office  
272-5342