Naval Medical Center Portsmouth Emergency Medicine Residency Program

EMERGENCY







Naval Medical Center Portsmouth

The Naval Medical Center Portsmouth Department of Emergency Medicine boasts a steadily increasing annual patient census of 70,000 + patient visits per year, approximately 30% pediatric. The department contains 47 beds: 23 "Main Side" beds, 2 resuscitation bays, two Observation Unit beds, one forensic exam room, 4 psychiatric beds, as well as 12 "Fast Track" rooms and 3 Orthopedic fast track beds. The Emergency Medicine Department is an independent department in the Medical Directorate. At the current time, the Emergency Medicine Department is responsible for the operations of the emergency treatment area, and the Fast Track treatment area. Forty nurse corps officers, over 50 corpsmen, and over 15 civilian workers are members of the department.

The Emergency Medicine (EM) Residency Program at the Naval Medical Center, Portsmouth (NMCP), Virginia, is converting to a four-year (PGY 1-4) program over the next three years. In 2013 the residency will accept its first four categorical EM interns. In 2014, six will be accepted followed by a full compliment of eight in 2015. In 1995, the program became the first Emergency Medicine residency program ever to receive 5 year accreditation on the first review. Full accreditation has been awarded in every subsequent review.

Residents spend about one quarter of the year at various affiliated training sites located within 20-40 minutes from Naval Medical Center Portsmouth. The training in these emergency departments provides a comprehensive experience in multiple, critical patient encounters and life saving procedures in an assortment of practice settings that enhance the Emergency Medicine core curriculum.



Program Director's Welcome Message



Our goal is to prepare Emergency Physicians to excel in any hospital or environment in the world, including the battlefield and other austere conditions. A strong focus on officer and leadership development sets our program apart from our civilian counterparts. No bones about it, our curriculum is difficult and challenging but ultimately rewarding in that upon completion you will be the most well rounded, self-reliant, confident emergency physician possible. The academic tradition and core values our program instills is demonstrated by the excellent representation of our graduates in leadership and academic positions both in and out of the Navy. We

encourage participation in a wide range of professional, academic and leadership opportunities that prepare trainees for success and rapid promotion. Since Emergency Medicine can be a demanding lifestyle on trainees and their families we also emphasize balance and the mental and physical well being this provides. Our faculty is exceptional, composed of over 20 enthusiastic teachers and mentors. We routinely win competitive awards including national teaching awards, national academic awards, and national research awards. Our current faculty is the best we've ever had and our faculty-to-resident ratio approaches one to one. Our Chairman, Directorate of Graduate Medical Education, and Chain of Command have been consistently supportive of our program and all faculty members have protected academic time. The ground here is fertile and the opportunities are endless.

We believe enthusiasm in training and work is directly proportional to working with fun, dedicated people. We strive to select self-starting, motivated residents and faculty that are enjoyable to work with.

Our graduates work and excel anywhere and everywhere: from Riverside Regional Hospital to international missions on US Naval Hospital ships and Marine Expeditionary Units; from Cook County to the rugged terrains of Afghanistan and Iraq. Our staff and residents are deeply involved in operational medicine through training and temporary deployments. Many ultimately volunteer and serve in high-tempo specialized operational billets. It is not a coincidence that a recent Surgeon General and current Chief of the Medical Corps are Emergency Physicians. When you graduate from this program, you're ready to practice and lead anywhere.

We look forward to meeting with you. If you have any questions or want to schedule an interview, contact us by email at james.barry@med.navy.mil or nmcp-em_residency@med.navy.mil, or by phone at 757 953 1407.

The Uniqueness of Military Emergency Medicine



No job in clinical medicine today is more challenging than emergency medicine. The hallmark of our specialty is the ability to evaluate a patient in distress with an undifferentiated complaint and quickly stabilize, treat, and disposition. Emergency Medicine is a specialty of breadth. Our scope of practice touches on almost every

medical specialty. Every shift is unique as one manages a variety of patients and problems in parallel in a high tempo environment. Emergency medicine is an exciting, challenging, and rewarding career. Military emergency physicians take this one step further. Not only are we required to know how to treat civilian emergent conditions such as low velocity gun shot wounds and motor vehicle crashes, but we must have the capability to shift from the realm of civilian trauma to treating high velocity rifle wounds, severe blast injuries, and other unique combat injuries that may occur in a host of extreme environments far removed from the ability to conduct standard resuscitation protocols. Practicing good medicine even in unconventional environments is what attracts many of us to the specialty.

Military Emergency Medicine requires the ability to think on one's feet, improvise, adapt, and overcome.

The challenge of military emergency medicine is not the only reason to consider remaining on active duty for residency training. For most physicians who have completed an operational tour annual



income is three times the amount of civilian counterparts and nearly double that of those that accept training



immediately after internship. Leadership opportunities are more plentiful for military residents and unique opportunities for duty stations are plentiful. Graduates can serve overseas in Spain, Italy, Guam, Okinawa, and Japan. Primary EM billets in the United States include Portsmouth VA, Jacksonville FL, Camp Lejeune NC, Bremerton WA, as well as San Diego, 29 Palms, and Camp Pendleton, CA. Many graduates' career paths see them serving with operational units afloat, abroad, or with the Special Forces community. Emergency Medicine is a "Tip of the Spear" specialty.





As you will see in the remainder of this brochure, the Emergency Medicine Residency at Naval Medical Center Portsmouth is arguably the nation's premiere military emergency medicine residency training program. The program is strong in academics with an excellent pass rate on written and oral boards. Our state-of-the-art simulation center allows realistic training on advanced and difficult-to-manage resuscitations improving patient outcomes when faced with similar real-life scenarios. Our curriculum is always improving with new rotations and innovative clinical advancements to enhance the learning experience.

Whatever your interest in emergency medicine, we will help you build an exciting and rewarding career.



Overview

The Residency Program is a 48 month (PGY 1 - 4) experiential curriculum broken into 52 four-week blocks with the following broad overlay:

Emergency Medicine	18 blocks	NMCP ED		
	5 blocks	various local civilian institutions		
Trauma/Burn	3 blocks	Norfolk General Burn Trauma Unit		
EM/Trauma	2 blocks	Riverside Regional Medical Center		
EM Resus/Trauma	1 block	University of Florida		
		Shands, Jacksonville		
Pediatrics	3 blocks	8 weeks Children's ED, 4 weeks PICU		
Critical Care	4 blocks	8 weeks CCU, 8 weeks ICU		
Anesthesia	2 blocks			
Obstetrics	1 block	2, two-week blocks		
Orthopedics	1 block	2, two-week blocks		
Oral Maxillo-Facial	1/2 block			
One block is spent in each o	One block is spent in each of the following rotations:			
Ultrasound, EMS, Toxicology, Teaching/Administration, Internal Medicine,				
General Surgery				
REBIL	1 week	Research & EBM Introductory Learning		
CAPSTONE	1 week	Culminating training exercise and final		
		preparation for military EM practice		

Required Academic Texts:

Rosen's <u>Emergency Medicine: Concepts and Clinical Practice</u>, 7th ed. Roberts and Hedges: <u>Clinical Procedures in Emergency Medicine</u>, 5th ed. Tintinalli: <u>Emergency Medicine: A Comprehensive Study Guide</u>, 6th ed.

Weekly and Monthly Activities

Academic Conference occurs from 0730 – 1230 on each Wednesday, except holidays. A weekly quiz on required reading is administered the first 30 minutes and the remaining time is spent in didactics that include case presentations and lectures by residents and staff. Guest lecturers and combined lectures with other programs and specialties are featured each month. Many conference sessions are arranged in an alternative format, including simulation, small-group discussion, and oral board format. Highlighted conferences, including Morbidity and Mortality Conference, Military Unique Curriculum Conference, Combined Specialty Conference, and Visiting Professor Conference, occur monthly. Assigned reading is from Rosen's Emergency Medicine: Concepts and Clinical Practice, 7th

edition; Tintinalli's EM Comprehensive Study Guide, 6th ed; selected landmark articles, and other important cutting edge literature. Graduating residents will have read each of these definitive texts in emergency medicine in their entirety prior to graduation.

Journal Club is a relaxed monthly gathering held at a faculty member's home where residents learn to read and critically appraise the literature, utilize evidence-based medicine in practice, and develop knowledge about how to design and implement clinical studies. It also affords an opportunity for staff and residents to interact and socialize outside of the department.

Monthly **simulation training** is conducted at the NMCP Simulation Center; a state-of-the-art facility utilizing several adult and pediatric computerized simulation manikins. Residents are assigned to educational exercises conducted in the lab on a monthly basis. The lab is used to challenge a resident's ability to manage complex resuscitation scenarios. A total of 12 clinical scenarios are conducted, 4 for each year of residency, with escalating levels of complexity and medical decision making. Each year involves at least one pediatric case, one trauma case, and two medical cases.

Vivarium/Life Support lab is where emergency medicine procedures are discussed, demonstrated, and performed. This lab adds the advantage of conducting infrequently performed, yet critical procedures (transvenous pacemaker insertion, thoracotomy, pericardiocentesis, hemostatic agent use, trephination, and DPL, among others) in a live tissue model.

Quarterly and Annual Activities

Orientation marks the beginning of the residency. This 4-week block is dedicated to the introduction of military EM as a unique specialty. New residents are introduced to core EM topics through didactic lectures, simulation training, PALS/ATLS certification, ultrasound / airway / procedure courses, and clinical orientation shifts in the ED. Organizational team building days, the annual program director's dinner and the annual Augtoberfest provide an opportunity for resident wellness, team bonding, and family introduction to the NMCP EM group.

Mock oral boards are conducted quarterly in lieu of conference. This provides familiarization with the oral board format, which must be mastered in order to pass the formal oral board exam after graduation. This format can be quite different from day to day practice and conducting practice exams four times per year prepares the resident for confident success on the exam. The resident's management skills and thought process are evaluated in the format of single patient cases and in dealing with 3 patients simultaneously.

Promotion Boards are conducted at the end of each academic year prior to advancing residents to the next level of training. This is a unique and beneficial assessment designed to coach the resident in meeting the emergency medicine core curriculum for each year group, including scholarly activity such as research and publications.

Every year the PGY 2-3 residents attend the **REBIL Course** (Research & Evidence Based Medicine Introductory Learning Course) usually held midway through the EM1 and EM2 year. This course was designed to ensure our residents incorporate scientific inquiry into their practice of humanistic patient care. Broad evidence based medicine and basic research topics provide a foundation for residents to build upon in the following years of training. REBIL provides a relaxed, collegial format and social activities, permitting time for class bonding.

The senior PGY 4 class attends the **GSACEP JSS** (Government Services chapter of the American College of Emergency Physicians annual Joint Services Symposium) conference in March. This funded conference emphasizes cutting-edge battlefield Emergency Medicine, bringing together senior residents and the military's most recognized EM experts from all three military services.

Graduating seniors also attend **Operation CAPSTONE** near the end of their training. Borrowed from the Army's concept of operational adaptability, operation CAPSTONE is a progressive initiative preparing EM graduates for the myriad of professional, operational and tactical situations faced by our present and future military Emergency Physicians. This experience is the ultimate culmination to the 48 month EM residency training; tackling the broad themes of **Operational/Tactical EM, HADR (Humanitarian Assistance and Disaster Relief)**, and **Military Professionalism**, by immersing the graduating EM resident class in challenging realistic operational scenarios. Team bonding social activities serve as the last hurrah for the graduating class.

Future Directions

The NMCP EM Residency Program aggressively pursues improved learning opportunities for present and future residents. We utilize annual resident, graduate and employer surveys to highlight areas for enhancement. Residents are intimately involved in the inspiration, planning and execution of these advancements.

Tentatively funded for AY2013-2014 is NMCP's Project NEPTUNE. An initiative that will open NMCP to local Portsmouth EMS critical care (life-threat only) traffic. The ED anticipates an additional 6-8 resuscitations/day with the introduction of this expansion.

Orientation	4 weeks	
NMCP ED	8 weeks	
Leigh ED	4 weeks	Leigh Memorial Hospital
Pediatric ED	4 weeks	Children's Hospital of the Kings Daughter
Anesthesia	4 weeks	
Adult ICU	4 weeks	
Cardiology	4 weeks	NMCP Cardiac Care Unit
Trauma	4 weeks	Norfolk General Burn/Trauma Unit
Internal Medicine	4 weeks	NMCP IM Wards
General Surgery	4 weeks	NMCP GS Wards
Obstetrics	2 weeks	NMCP Labor & Delivery
Orthopedics	2 weeks	NMCP Orthopedic Fast Track
Selective	4 weeks	Select from a variety of opportunities

EM1 (Proposed)

Categorical EM interns are generally expected to serve the fleet by completing a General Medical Officer (GMO) tour (2-3 years) before returning for the last three years of EM training. The present Navy system requires candidates to reapply for PGY-2 training after completing their GMO tour. Interns are encouraged to apply for PGY-2 positions as well, but GMO candidates are provided an advantage in selection scoring. Thus, although completing a categorical EM internship provides a distinct and clear advantage for selection, it does not guarantee continued EM training.

EM 2

Orientation	4 weeks		
NMCP ED	15 weeks		
Leigh ED	4 weeks	Leigh Memorial Hospital	
Pediatric ED	4 weeks	Children's Hospital of the Kings Daughter	
Orthopedics	4 weeks	NMCP Orthopedic Fast Track	
Anesthesia	4 weeks		
Trauma	4 weeks	Norfolk General Burn/Trauma Unit	
Ultrasound	4 weeks		
Cardiology	4 weeks	NMCP Cardiac Care Unit	
Obstetrics	2 weeks	NMCP Labor & Delivery	
OMFS	2 weeks	Oral-Maxillo-Facial Surgery service	
REBIL	1 week	Research and Evidence Based Medicine	
		Introductory Learning	

Program Curriculum by Year

EM 3

NMCP ED	20 weeks			
VB ED	4 weeks	Sentara Virginia Beach General Hospital		
Leigh ED	4 weeks	Leigh Memorial Hospital		
Trauma	4 weeks	Norfolk General Burn/Trauma Unit		
Pediatric ICU	4 weeks			
Adult ICU	4 weeks			
Teaching/Admin	4 weeks	Focus on developing teaching skills and		
		ED administrative issues		
EMS	4 weeks	Emergency Medicine Services		
Ultrasound	4 weeks	AY12-13 only as we transition this		
		rotation to the EM2 year		

EM 4

NMCP ED	20 weeks			
VBED	4 weeks	Sentara Virginia Beach General Hospital		
ED/Trauma	8 weeks	Riverside Regional Medical Center		
Resus/Trauma	4 weeks	Univ of FL/SHANDS Resus/Trauma Bays, Jacksonville, FL		
Toxico logy	4 weeks	New York City Poison Control Center/Bellview Hospital		
Elective	8 weeks			
CAPSTONE	4 weeks	Culmination of training focused on transition to military-based EM practice		

Leave:

Residents may take annual leave in the following maximum amounts: EM-1/2: 14 days EM-3/4: 21 days

Research:

The command structure at NMCP is very supportive of both clinical and operational research. Each resident must engage in some form of scholarly activity with many residents choosing to work on a formal research project. Recent resident research projects have enjoyed publication in many peer-reviewed journals and our program has won the McDade award for excellence in resident research presented by the Virginia College of Emergency Physicians in two of the last five years. The Hemorrhagic Shock Research Group is a research arm of the Department of Emergency Medicine that is primarily run by EM residents and faculty interested in combat trauma.

Thisgroup engages in resuscitation and hemostatic agent research on porcine models of combat trauma.



NMCP Annual Research Competition Poster Session

Held each year in mid to late March, draws over 100 participants, in three categories each year.

<u>Recent Research and Academic Awards / Recognition</u> (last 5 years):

AAEM Young Educator Award - 2011 AAEM Mitchell Goldman Distinguished Service Award - 2012 Best Innovation in EM Education, SAEM - 2008 CORD Faculty Development Scholarship - 2011 EMRA Robert J Doherty Scholarship - 2011 GSACEP Excellence in Military Medicine Award - 2011 GSACEP Leadership and Advocacy Scholarship winner - 2011, 2010 **GSACEP** Rising Star Award - 2012 GSACEP Research Award - 2008, 2007 National Resident Academic Achievement Award - 2008 NMCP Junior Medical Officer of the Year - 2010 NMCP Civilian of the Quarter (3rd quarter) - 2010 NMCP Senior Officer of the Quarter (2nd Quarter) - 2011 NMCP Medical Corps Officer in Training of the Quarter - 2011 $(1^{st}Quarter), 2010(2^{nd}, 3^{rd}, 4^{th}Quarters)$ NMCP Medical Corps Officer of the Year - 2011 SAEM Clinicopathologic Competition Final Winner - 2010 SAEM Clinicopathologic Competition Semi Final Winner - 2011, 2010, 2008 SAEM Young Investigator Award - 2011 VACEP Resident Jeopardy Competition winner - 2007 VACEP John P McDade Award - 2007, 2012 Multiple NMCP Academic Research Competition awards (5 in 2012 alone)

Emergency Ultrasonography

Emergency ultrasound is a strength of the NMCP EM Residency. We offer the latest equipment, access to faculty credentialed in the full range of

emergency ultrasound applications, and graduate residents who competently integrate these applications into their daily practice.

Emergency Ultrasound is paramount to the clinical, educational, and research goals of the NMCP EM Residency. Graduating residents are comfortable utilizing bedside ultrasound in all core emergency applications as defined in the 2008 American College of Emergency Physicians Emergency Ultrasound Guidelines including: Trauma, Intrauterine pregnancy, Abdominal aortic aneurysm, Cardiac, Biliary, Urinary tract, Deep v e n o u s t h r o m b o s i s , S o f t tissue/musculoskeletal, Thoracic, Ocular, and Procedural guidance.



In addition, motivated residents can gain experience in advanced ultrasound applications: advanced echocardiography, bowel/appendix ultrasound, adnexal pathology, regional anesthesia, and testicular. Our program recognizes that emergency ultrasound has extremely important tactical military applications and is committed to ensuring that every emergency medicine resident graduates with these proficiencies.

The department currently has three of the latest Sonosite M-Turbo ultrasound machines. We remain committed to ensuring that the quality of machine we use is always up-to-date. Collectively, our residents perform more than 4,000 scans/year and that number increases annually. Our attending physicians are credentialed and a quality assurance program audits every ultrasound that is performed in the department.

International Medicine

NMCP EM maintains the most robust international medicine program in the DoD Physician Graduate Medical Education system. This program provides an excellent opportunity for residents to assist in broadening the scope of both military and emergency medicine and the international face of Navy Medicine. NMCP EM International Emergency Medicine is a 2-4 week elective that can be pursued in the EM-3 or EM-2 years. The rotation is self-paced with lectures, current literature, web resources, travel health, and Navy predeployment standards to review prior to leaving for an international rotation site. The elective can be tailored according to resident interest and expertise. Recent location sites include the Dominican Republic, Panama, Bhutan, Ghana and SouthCom sites. International Medicine includes systems development (EMS, EM program development, training programs), humanitarian and disaster assistance (assessing needs and providing care in complex disasters, displaced populations, etc) and integration with civilian organizations (NGOs, Red Cross, UNHCR). This program is rapidly maturing.

Emergency Medicine Medical Student Clerkship

The Emergency Medicine residency is affiliated with the Uniformed Services University of Health Sciences in Bethesda MD and provides an Emergency Medicine Clerkship as well as teaching at USUHS's EM procedure and Ultrasound sessions. The EM clerkship is designed to provide medical students exposure to the practice of military emergency medicine via clinical shifts alongside teaching faculty and senior residents. Students also attend Wednesday academic conferences and are invited to attend our monthly journal clubs. While on clerkship, students receive small group instruction and hands-on training in emergency procedures at NMCP's simulation center and at our monthly emergency procedures lab. Rotators routinely cite NMCP EM as the best opportunity to gain experience with procedures and learn important skills in emergent and acute first contact medicine.

Affiliated Program Training Sites

<u>Sentara Norfolk General Hospital:</u> Trauma rotations are completed here, at the only area Level I Trauma Center. Residents receive in-depth and hands-on experience in performing and directing resuscitations in the multi-trauma patient, as well as how to effectively manage the trauma team.

Proficiency is also gained in the performance of central and arterial line placement, tube thoracostomy, FAST exams, diagnostic peritoneal lavage, and all other procedures necessary for the resuscitation and stabilization of the trauma patient.

<u>Sentara Virginia Beach General</u>, a 274-bed acute care hospital, provides residents with valuable experience working in the Emergency Department of a busy community hospital. A Level II Trauma Center, there is ample opportunity for residents to evaluate and manage critically ill and injured

patients. Being only a few miles from the oceanfront, residents have the opportunity to gain expertise in evaluating environmental injuries, including dysbaric injury, marine envenomation and poisoning, submersion injury, hyperthermia, and hypothermia.

<u>Sentara Leigh General Hospital</u> is a 250-bed acute care facility serving Norfolk, Virginia Beach, and Chesapeake. The hospital is surrounded by various nursing homes and thus provides care to the elderly with multiple medical problems of moderate to high acuity. The hospital also houses a hyperbaric

oxygen therapy chamber to help speed the recovery of patients with major wounds, decompression sickness and carbon monoxide poisoning.

<u>Riverside Regional Medical Center</u> is a level II trauma center located in Newport News which serves as a primary referral center for STEMIs and Strokes as well as for higher acuity patients from the "peninsula" area of the Tidewater/Hampton Roads area of Virginia. The emergency department sees 38,000 patients per year with a 25% admission rate.

Residents are the first physician responder and team leader for all trauma patients.









<u>Children's Hospital of the King's Daughter</u> is the only dedicated pediatric hospital in the entire Commonwealth of Virginia. The Emergency Department consists of 40 beds with an annual census of 35,000 patients. Residents work alongside

pediatric emergency medicine fellows and pediatric residents during shifts that are supervised by board certified pediatric emergency medicine attendings. This rotation occurs during the first year of residency and provides the resident the opportunity to become comfortable and confident in recognizing the acutely ill child.

<u>New York City Poison Control Center</u>: Located in Manhattan, NY and affiliated with New York University Medical Center. This is a fully funded one month rotation with didactic teaching by nationally known toxicologists.

Shands at the University of Florida, Jacksonville, FL: Shands Jacksonville is home to the TraumaOne trauma program, the only stateapproved adult and pediatric Level I Trauma Center in Northeast Florida and Southeast Georgia. The

TraumaOne Trauma Center has five resuscitation beds. NMCP EM Residents work strictly in the Medical Resuscitation and Trauma Resuscitation bays of Shands/TraumaOne.

Access to the NMCP Network, Web Resources and Library Services

The Information Management Department offers the ability to log into the network from any computer with a web browser 24hrs a day, 365 days a year. This allows you to access any and all resources available at NMCP from the comfort of your home. This includes Outlook email, all Library resources, Radiology Department files, AHLTA, CHCS, and all your own personal hard drive applications and files.

The NMCP Health Sciences Library is available for use every day of the year, 24hrs a day. There are numerous computer terminals and wireless internet available for personal use and academic research. Literature search services are available free of charge.

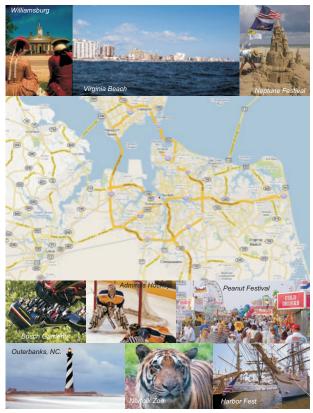
Outstanding resources such as UpToDate, eMedicine, MDConsult and over 400 electronic journals are accessible 24hrs a day.





Quality of Life

Naval Medical Center Portsmouth is located on the banks of the Elizabeth River in the historic and diverse community of Hampton Roads. Portsmouth is centrally located between the resort city of Virginia Beach, the vibrant downtown o f Norfolk, suburban life in Chesapeake, the more rural Suffolk, and the peninsula communities of Hampton and Newport News. All are located no more than 20-30 minutes from Portsmouth!



This region is one of the most popular vacation sites on the East Coast. Miles of beautiful beaches are minutes away in Virginia Beach. Outdoor and environmental enthusiasts will love the ecologically diverse Chesapeake Bay and its inland waterways that transect the entire region. The historic triangle of Williamsburg, Jamestown, and Yorktown boast some of the most significant historical attractions in the country. Busch Gardens Europe and Water Country USA are only 45 minutes away. The watersport paradise of North Carolina's Outer Banks is just an hour away. The eastern shore and its famous islands of Chincoteague and Assateague are only 90 minutes north. Skiing and mountain activities are only 3 hours away, as is Washington D.C and all it has to offer.

The Hampton Roads area boasts world-class theater, opera, broadway shows, and a symphony. Museum enthusiasts will love Nauticus in downtown Norfolk with the Battleship Wisconsin alongside, the Virginia Air and Space museum (adjacent to the Langley NASA research center), the Chrysler Museum of Art, the Norfolk Botanical Gardens, the Norfolk Zoo, as well as the Virginia Aquarium, one of the largest and top-rated Aquariums on the east coast. Sports are well represented by Triple-A baseball's Norfolk Tides (who play in Harbor Park, voted the best minor league baseball stadium in the country) and AHL Hockey's Norfolk Admirals. Runners and triathletes will enjoy the multitude of world class races in the area, including the Rock 'n Roll Half Marathon (held at the Oceanfront during the American Music Festival, which is the largest outdoor music festival on the east coast), as well as the St. Patrick's Day Shamrock Sportsfest. These events, along with multiple Division-I university athletic programs, give sports enthusiasts plenty to do.

Cost of Living

While Hampton Roads has an amazing array of things to do, the cost of living remains near the national average, and far below that of the other Military Medical Centers. See the chart below for cost of living comparisons, and you will see that there is no other Naval Medical Center in the country where you can get so much for so little!

Index	National Average	Hampton Roads-SE Virginia , VA	San Diego , CA	Washington D.C
Ovarall (A score of 100 is the national average, lower is better!)	100	107	133	133
Housing	100	110	184	186
Food/Grocery	100	104	103	112
Utilities	100	96	96	99
Transportation	100	98	115	103
Health	100	108	112	105
Miscellaneous	100	114	104	104
Owning/Renting	National Average	Hampton Roads-SE Virginia , VA	San Diego, CA	Washington D.C
Average Home Prices	\$183,450	\$202,360	\$337,190	\$340,360
Average Rent 2bdr, SFH	\$1029	\$904	\$1418	\$1288

Bottom Line: World class residency education, exciting recreational activities, short commutes, and a low cost of living make the NMC Portsmouth Emergency Medicine Residency the easy choice! **Program Contact Information**

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Web Links and How to Apply:

Naval Medical Center Portsmouth EM Residency website: <u>http://www-nmcp.mar.med.navy.mil/EmerMed/index.asp</u>

Naval Medical Center Portsmouth GME website: <u>http://www-</u> <u>nmcp.mar.med.navy.mil/EduRes/AcademicAffairs/Contacts/</u> <u>index.asp</u>

Follow the link "<u>Bumed (GME) 1524-1b</u>" to view the GME Instruction.

