Duke Orthopaedic Surgery

ORTHO 429C: SUBINTERNSHIP IN ORTHOPAEDIC SURGERY

Medical students planning to apply to the Duke Orthopaedic Surgery Residency Training Program for the upcoming match season are required to complete this one-page application (PLEASE TYPE – DO NOT HANDWRITE) and submit along with required supporting documentation (as shown below); visiting students should upload to <u>AAMC-VSAS</u> and Duke students should email to **Ms. Thompson.** Submitting required application and supporting documents (at the time that you apply through VSAS <u>or</u> at the time that you sign-up through Duke SOM) will guarantee that our office will arrange select faculty interviews on your behalf (to occur during your 4-week rotation period).

INSERT COLOR PHOTO

Name		Today's Date				
Last, First, Mido	dle, Suffix Preferred	· _				
Address		Birth Date				
Street		Birthplace				
		Citizenship				
City, State, Zip		Military Status				
Telephone		Applying to our P	Program via ERA	S (Yes/ No)		
Mobile		Notes:				
Pager						
E-Mail						
Premedical College				Dates		
-			Degree/ Major		Month/ Year	
Advanced Work				Dates		
			Degree/ Major		Month/ Year	
Medical School				Dates		
Class Rank			Degree/ Major AOA Member (Yes/ No/	Month/ Year	
	USMLE Scores	UDENTS ONLY	NA)			
Faculty Interaction	List of Duke Faculty with whom you've participated i					
Duke Credentials	For Badge Access: Unique ID #	Net ID		Duke Card #		
REQUIRED SUPPORTING DOCUMENTATION						
Curriculum Vitae	For visiting students, our office will obtain a copy of your CV from VSAS. For Duke students, please submit a copy directly to our office.					
Personal Statement	For visiting students, our office will obtain a copy of your learning objectives from VSAS. It is recommended that you include a brief description of your background, educational experience, honors, extracurricular activities, possible research activities, plans for residency training, and future goals. For Duke students, please submit a copy directly to our office.					
Reference	For visiting students, our office will obtain a copy of your reference letter from VSAS. It is recommended that the letter come from an Orthopaedist. Reference letters are not required for Duke students.					
Transcript	For visiting students, our office will obtain a copy of your medical school transcript from VSAS. For Duke students, please submit a copy directly to our office.					
2021-2022 SUB-INTERNSHIP DATES (4 weeks only)						
SPRING TERM 2021 SUMMER TERM 2022		FALL TERM 2022		SPRING TERM 2023		
N/A	42/May 31 – June 24 (Duke students only)	/) *41/ August 22 – Sept. 16		42/ Jan. 30 – Feb. 24		
	*43/ June 27 – July 22	*42/ Sept. 19 – Oct. 14		44/ March 27 – April 21		
	*44/ July 25 – Aug 19	*43/ Oct. 17				
*44/ Nov. 14 – Dec. 9 *We are aware that some medical school calendars do not coincide with the Duke University School of Medicine elective calendar. It is recommended that you						
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*We are aware that some medical school calendars do not coincide with the <u>Duke University School of Medicine</u> elective calendar. It is recommended that you coordinate with your home school for approval to visit our program during the predetermined Duke dates. We are confident that your home school will make an effort to accommodate your request if given reasonable advanced notice. Due to the high volume of student applicants, it is not possible to accept students outside of the predetermined Duke dates during Summer Terms 43/44 and Fall 41/42/43/44.

Duke Department of Orthopaedic Surgery Contact: Wendy R. Thompson (919) 684-3170 · wendy.thompson@duke.edu https://ortho.duke.edu/ Duke University School of Medicine/ VSAS Contact: Scott Campbell (919) 684-8042 · scott.campbell@duke.edu https://medschool.duke.edu/education/student-services/office-registrar/visiting-students

