Montefiore Medical Center Albert Einstein College of Medicine Department of Family & Social Medicine Residency Program in Social Medicine-Family Medicine Track

Elective/Off Site Elective-Approval Form

Resident Full Name: _	Joshua Yap		PGY Level	1□ 2□ 3□4
Elective Information (1	Please type/print legibly	<u>:</u>		
Type/Name of Elective	:High volume abou	tion training in	hostile environment_	
Location of Elective:	Texas Date	s: _2 to _	27 Cycle: _7B-8	8A
Supervisor: Robin W	allace, MD /Marji Gold,	MD / Kristie M	onast	
Phone Number:	Email: rwal	acep@gmail.co	om_kmonast@midwes	taccessproject.org
2. Exposur 3. Understa Knowledge & Skills to 1. Advance 2. Exposur 3. Understa	e skills in abortion care te to second term abortion and nuances in abortion ca the acquired: e skills in abortion care te to second term abortion and nuances in abortion care exposure to vasectomies	re in an hostile		
Weekly Sched	lule: Make sure your sched	ile is duty hours	compliant	Work Hours
Monday	8-4			8
Tuesday	8-4			8
Wednesday	8-4			8
Thursday	8-4	-		8
Friday	8-4			8
Saturday				
Sunday				
XNot on sick call XNot Reviewed by Team Lea	nder/Advisor:	approved □		

Signature of Program Director, Date