



Accreditation Period: 2019-2023

MAYO CLINIC in FLORIDA JACKSONVILLE, FLORIDA



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TWO YEAR PROGRAM



2-Year Program	
Optional Degrees: <input type="checkbox"/> MPH <input type="checkbox"/> MBA <input checked="" type="checkbox"/> MS <input type="checkbox"/> Other: <input type="checkbox"/> None	
Number of Faculty	
GYN Faculty:	UROGYN Faculty: 3
REI Faculty:	ONCOLOGY Faculty: 2
GU Faculty:	General Surgery Faculty:
Colorectal Faculty:	Other: MIGS Faculty: 2
Residency Program Affiliation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Computer Simulation Center: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Training Labs	
<input checked="" type="checkbox"/> Cadaver lab	<input type="checkbox"/> Animal Lab <input type="checkbox"/> None
<input checked="" type="checkbox"/> Dry Lab	<input checked="" type="checkbox"/> Robotics
Office Surgery: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Contract/Agreement Letter: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Stipend PGY-5 or 6:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Resident Teaching	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Benefit Package:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
OB obligation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please describe obligation.
Junior Faculty	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Attending Privileges <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Moonlighting:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Non-compete clause: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Malpractice:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Meeting support: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Malpractice tail coverage:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Other coverage obligations- specify: NA
Accept J1 & H1Visa applicants <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Dedicated Research Hours: Hours/per week: 4 Hours/per month: 16	
Protected Academic: Hours/per week: 2.5 Hours/per month: 10	
Clinical Focus/Special Interest	
<input type="checkbox"/> Reproductive Surgery	<input checked="" type="checkbox"/> Oncology
<input checked="" type="checkbox"/> Endometriosis/Pelvic Pain	<input checked="" type="checkbox"/> Pelvic Reconstruction
<input checked="" type="checkbox"/> Robotic Surgery	<input type="checkbox"/> Pediatric/Adolescent
<input checked="" type="checkbox"/> Hysteroscopic Surgery	<input type="checkbox"/> Other:

Description of Program:

The program conducts fellowship training in a structured setting supervised by senior physicians who have completed subspecialty training and who are board-certified in their respective fields. The fellowship program also includes research training at Mayo Clinic as well as the basic science and simulation facilities located on-site.

Fellows have the opportunity to participate in all surgical cases on the gynecologic service, which span the depth and breadth of procedures in gynecologic oncology, urogynecology, pelvic floor surgery and benign gynecology. Fellows also perform gynecologic oncology procedures including laparoscopic treatment of cervical, endometrial cancer, and select cases of ovarian cancer.

Fellows develop competency in gynecologic oncology, abdominal, pelvic and retroperitoneal anatomy, and performing procedures such as ureterolysis, complicated adhesiolysis, and repair of bowel, bladder and vascular injury, both intentional and incidental. In addition, fellows learn gynecologic oncology principles that are useful for surgical cases in which cancer is diagnosed unexpectedly.

Fellows conduct urogynecologic procedures including vaginal, laparoscopic and open surgery for urinary incontinence. Patients with pelvic organ prolapse are commonly treated with vaginal surgery or in a minimally invasive manner. The faculty has expertise in the treatment of fistulas of the female genital tract, anal incontinence, and creation of neovaginas. In addition, patients with advanced endometriosis, severe pelvic adhesions, or severe co-morbidities are referred to Mayo Clinic for treatment, further enriching each fellow's surgical experience.

In general, eligible patients are offered minimally invasive surgery. Conventional laparoscopy is used preferentially, with robotic assistance reserved for cases where improved optics or access may prove beneficial. Teaching robotic surgery is enhanced with the availability of dual surgical consoles in the OR, which allows fellow and faculty to quickly switch roles between being an assistant and the primary surgeon during the case. Fellows also learn hysteroscopic procedures to treat the patients and allow for uterine preservation. Cystoscopic procedures for diagnosis or placement of therapeutic or prophylactic ureteral stents are commonly performed. Cystoscopy and hysteroscopy are routinely performed in the office, in addition to the OR.

Fellows "scrub in" on all surgical cases on the day that each fellow is assigned to the OR. On days where concurrent cases are in progress, each fellow participates in the more challenging case or the one that offers the most educational benefit. The fellows start as the first assistant on a surgical case. As fellows demonstrate progression, he/she assumes the primary surgeon role with the faculty member being the first assistant. Towards the end of fellowship, fellows may operate with a visiting resident physician as the first assistant in a teaching capacity, while the faculty scrubs as the second assistant. It is common for the two fellows to operate together, with the senior fellow being the primary surgeon directing the case. This model of graduated responsibility also pertains to office based surgical procedures.

The fellows are allocated 4 days of weekly OR time; additionally, fellows have a weekly half day of research/education. Office procedures and clinic time are scheduled routinely into the fellows' weekly schedule at time periods most conducive to their learning.

Fellows have full access to the simulation (SIM) center which is equipped with daVinci Robotic trainers, MimicMed robotic surgery trainers and conventional surgical trainers. The SIM center staff consistently

updates program software. The task training room in the Simulation Center provides fellows with opportunities to practice skills and train on state-of-the-art devices offering a variety of learning opportunities.

Mayo Clinic provides multiple online resources for fellow education, accessible onsite as well as off campus (by remote access), through the Mayo Clinic intranet website. The Mayo Clinic medical library contains textbooks and journals for all specialties, as well as several computer terminals for online access. A complete library website with access to online textbooks and medical journals is available via the intranet. Fellows also have complete access to the personal library of all faculty members which includes all major texts and current journals in general gynecology, gynecologic oncology, urogynecology and pelvic floor surgery.

Fellows access medical search engines such as Pub Med, Medline and UpToDate through the library website. The fellow may download articles and chapters of interest or request a copy through email to the main Mayo library. Mayo Clinic also annually provides the fellowship a \$500.00 book fund which can be used to enhance specialty specific print resources.

Also available through the Center for Translational Science Activities (CTSA), fellows have access to different levels of statistical training, from moderate to advanced statistical techniques courses applicable to research and publication development. Through the CTSA, Mayo Clinic offers the opportunity for trainees to obtain a master's degree in clinical and translational science. A statistics course is required during the first year of fellowship unless previous graduate level statistical training has been completed.

The fellows are trained in research, taking advantage of the wide clinical spectrum of disease treated at the Mayo Clinic in Florida (MCF) as well as the basic science and simulation facilities located on-site. In addition to clinical research, fellows participate in surgical simulation and surgical education research, as well as analysis of large national databases to discern trends and patterns of care. These efforts are supported by a Mayo Clinic center for translational science. Institutional grants and department funding is available to support the research efforts.

Medical education is highly encouraged. Fellows are expected to teach and supervise residents and medical students rotating through the service. In addition, fellows are invited to participate in and teach courses at national meetings which Mayo faculty often attend as directors or faculty members.

The fellowship at MCF collaborates with a similar fellowship at Mayo Clinic in Arizona and Mayo Clinic Rochester for research, education and training exchanges to enhance the fellowship training experience at all 3 Mayo Clinic institutions. There is a half-day of weekly protected time dedicated to research. For fellows interested in basic science research, in lieu of weekly protected research time, the fellow may opt to have 6 consecutive months of dedicated research time with a basic scientist faculty member (2 months in the first and second year, an additional 2 months in the second year, to run consecutively). Fellows are required to present research findings at least once during fellowship at the AAGL meeting. Publication in peer reviewed journals resulting from fellow research is highly encouraged. Funding is provided for fellows to attend the annual AAGL meeting. Submission of research to SGS, ACOG, SGO, APGO/CREOG and other national meetings is highly encouraged. At the discretion of the program director, trip days and funding are available for any other national meeting where research is accepted for presentation.