

Research Fellowship

The department has created a 1 y student research fellowship to promote scholarly activity for highly motivated students between their 3rd and 4th years of medical school interested in orthopedics. This position will enable students to work with and integrate into an academic orthopedics department allowing students to engage the faculty, residents, and department researchers. The student will learn the basic principles of research design, methodology, data analysis and navigating the process from IRB submission to manuscript submission. The productivity and output from this fellowship will be based on the student's motivation and self-initiative to make the most of this experience.

- 1 academic year (fall to summer) commitment
- Must remain a full time student at home institution
- Manage research website content
- Facilitate ongoing student/resident research projects where needed.
- Develop and complete 2-3 independent research projects w various Orthopedic faculty using departmental processes and the research team
- Facilitate transportation of any research materials from OR to labs
 - o Need own transportation
- Participate in monthly research meetings
- Participate and work w student research committee
- Participate in health disparities tissue bank projects, proposals, and grant submissions
- Attend all dept didactic/teaching sessions (contact linda and Edwina to be included on email list)
- Assist Dr Leonardi in developing/maintaining surgical research databases
- Presentation of research project of choice at the department research meetings
- Communicate effectively on status of each project and progress with research team members
- Shadow various faculty in clinic 1d/wk
- Part time position, approx. \$10k/year

For more information please contact Dr Vinod Dasa (vdasa@lsuhsc.edu)

Orthopaedic Research Fellowship

Instructions: Please insert a typed response to each question.

Adapted with permission Dr Brent Ponce

Applicant

First Name:

Middle Name:

Last Name:

Gender Identity: Male Female

Date of Birth (MM/DD/YYYY):

Degree(s):

Permanent

Phone:

Fax:

E-mail Address:

Citizen or Permanent Resident: Yes No

Education

Undergraduate:

Undergraduate Institution:

City/State:

Dates Attended (From-To):

Degree:

Major:

Additional Post-Graduate Work (e.g. M.P.H., M.S., M.B.A., etc.)

Graduate Institution:

City/State:

Dates Attended (From-To):

Level Completed

Field of Study:

Medical School

Medical School Name:

Address:

Fax:

E-mail Address:

Current Year of Medical School:

Medical School GPA (or class rank):

USMLE Step 1

Date: Score:

USMLE Step 2

Date Score:

Do you have your own transportation: Yes No

Would you be willing to assist with basic science research? Yes No

Have you completed CITI Training? Yes No

Research Experience

Have you had past experience in clinical research: Yes No

If you answered “yes” to the question above, please describe your work in an attached document:

Extracurricular Activities:

Career Plan/Personal Essay:

- Please describe how you view this research fellowship opportunity in light of your career plans. Explain why you are interested in doing orthopaedic clinical research in the Division of Orthopaedic Surgery at LSU New Orleans.
(limit to <1-page, size 12 font, 1.5 line spacing)

Additional Requirements:

- Medical School Transcript
- One (1) letter of recommendation
- Letter from your institution documenting you are a full time student in good standing
- Your typed CV on a separate sheet

Please email all information to Edwina Jackson: Orthopedic Surgery Research
Administrative Assistant: Ejack9@lsuhsc.edu

I certify that I have provided accurate information in this application, that the writing samples and other materials submitted as my own are indeed my original work, and I authorize the verification of my credentials for admission. Accordingly, I understand and agree that any misrepresentation or omission of facts in my application will justify the denial or the rescission of admission.

Applicant Signature: _____ (Please type your full name if submitting electronically)

Date: