



Pan-American Ophthalmological Foundation (PAOF)

Choices for Advanced Training

2010

Latin American/PAAO Pediatric Ophthalmology Fellowship

A one or two year hands-on pediatric ophthalmology fellowship is available for one (1) qualified Latin American ophthalmologist through the PAAO in the Department of Ophthalmology at the University of Texas Southwestern Medical Center in Dallas and its affiliated Children's Medical Center. The position will include the opportunity for direct patient medical and surgical interactions as well as the opportunity to participate in significant clinical research activities. The successful candidate must be a highly qualified medical & surgical ophthalmologist with good depth perception & surgical skills, fluent in written & spoken English, and dedicated to a vigorous learning experience.

UT SOUTHWESTERN
MEDICAL CENTER


MEDICAL CENTER

The Latin American/PAAO Pediatric Ophthalmology Fellowship is open to those general ophthalmologists from Mexico, Central, South America and the Caribbean who are committed to teaching in an accredited medical school in their home country and who will devote some time to charity clinics.



Pan-American Ophthalmological Foundation
2010 Latin American/PAAO Pediatric Ophthalmology Fellowship
Application Form Receipt Deadline: August 10, 2009

General Information

Deadline for Application

The applicant should be a general ophthalmologist, age 35 years or younger, from Mexico, Central, South America or the Caribbean. The *receipt* deadline for applications to the 2009 Latin American/PAAO Pediatric Ophthalmology Fellowship is **August 10, 2009**. Please note that deadlines will be strictly enforced.

Membership Requirement

All applicants must be or become a Member-in-Training (US\$50 per year) of the Pan-American Association of Ophthalmology (PAAO). *Preference will be given to those candidates who are Active Members/Member-in-Training at the time of submission of their application.* Verify your membership with the PAAO office.

Program Description

A one or two year hands-on pediatric ophthalmology fellowship is available for one qualified Latin American ophthalmologist through the PAAO in the Department of Ophthalmology at the University of Texas Southwestern Medical Center in Dallas and its affiliated Children's Medical Center. The position will include the opportunity for direct patient medical and surgical interactions as well as the opportunity to participate in significant clinical research activities. The successful candidate must be a highly qualified medical & surgical ophthalmologist with good depth perception & surgical skills, fluent in written & spoken English, and dedicated to a vigorous learning experience.

Application Qualifications

Qualifications for a successful candidate are as follows:

1. General ophthalmologist, age 35 years or younger
2. Fluent in both written and spoken English.
3. Willing to commit for one or two years of training.
4. Completion of a recognized ophthalmology residency in Latin America.
5. Established medical and surgical competence and good depth perception.
6. Highly recommended by chairperson and training program director.
7. Commitment to return to Latin America at conclusion of fellowship training program.

Program Preceptors/Faculty

Full Time Faculty: David Weakley MD, Serena Wang MD

Community Faculty: David Stager Sr. MD, George Beauchamp MD, David Stager Jr. MD, and Cynthia Beauchamp, MD

Department Chairman: James McCulley MD, FACS, FRCOphth(UK)

Medical Licensure During Program

Either (1) a physician in training license, if all necessary parts of USMLE has been passed, or (2) an Assistant Visiting Professor's license if USMLE not taken and passed.

Compensation & Benefits

Salary of approximately \$54,000 per year plus fringe benefits will be provided. Salary and the fringe benefits come from the University of Texas Southwestern Medical Center (UTSWMC) and Children's Medical Center (CMC) and include health insurance along with an accrual of vacation and sick leave hours. The fellow will be an employee of UTSWMC, working at Children's Medical Center.

Method of Application

All applications and materials must be submitted electronically, by email to info@paa.org. Failure to submit all requested materials can result in a delay in review of the application.

1. Completed application form.
2. English language proficiency (such as the TOEFL exam or the former ECFMG English Test).
3. CV (two to three pages) including training information and recent publications.
4. Letter of recommendation from department chair and/or training program director.



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Pan-American Scholarship Policies and Awardee Responsibilities

1. The Awardee is responsible for obtaining the appropriate Exchange Visitor Visa (J-1) and other travel documentation, if applicable.
2. The awardee must fulfill all duties and responsibilities of the hosting institution to the best of his or her ability.
3. The awardee will live under the financial limitations of the grant. The awardee cannot petition the hosting institution for part-time salaried positions, e.g. Emergency Room duty, to supplement the grant income. Salary and the fringe benefits come from the University of Texas Southwestern Medical Center (UTSWMC) and Children's Medical Center (CMC) and include malpractice and health insurance along with an accrual of vacation and sick leave hours. The fellow will be an employee of UTSWMC, working at Children's Medical Center.
4. The awardee is responsible for all expenses incurred while in the program, e.g. payment of his or her own housing, food, medical bills, etc. The PAAO assumes no responsibility or liability for the accidental injury or death of the awardee.
5. The awardee is responsible for obtaining and paying for personal insurance coverage while in the program. Types of insurance needed while in the program may include (but are not limited to): auto insurance, and renters insurance.
6. The awardee is strongly discouraged from bringing his or her spouse and/or other family members for the duration of the fellowship. If, in the event that the family member must accompany the awardee, the family member cannot interfere in any way in the fellowship or the hosting institution, e.g., finding a job or any other activity with the hosting institution.
7. The awardee understands that his or her name may appear in the PAAO/PAOF newsletters or other promotional material to promote this program for future participants.
8. The awardee is obligated to return to his or her country of origin and to participate in a teaching program and/or charity work for a minimum of six (6) months. The awardee must send the PAAO a letter of verification from the director of the program.
9. All applicants must be or become a Member-in-Training (US\$50 per year) of the Pan-American Association of Ophthalmology. *Preference will be given to those candidates who are Active Members/Member-in-Training at the time of submission of their application.* Upon completion of the fellowship, the awardee is responsible to become an Active Member of the PAAO.
10. The Awardee assumes entire responsibility and hereby agrees to protect, indemnify, defend, and save the Pan-American Ophthalmological Foundation (PAOF) and the Pan-American Association of Ophthalmology (PAAO) and their employees and agents, harmless against all claims, losses and damages to persons or property, governmental charges, or fines and attorney's fees arising out of or caused by the Awardee's participation in any PAAO/PAOF Program.
11. Upon return, the Awardee must remit a report (including pictures) on his or her experience to the Administrative Office.

Contact with Pan-American Ophthalmological Foundation Staff

The PAOF welcomes phone calls and or emails from applicants to clarify the PAOF's guidelines and application procedures. However, calls and or emails to discuss the details of pending scholarship applications are strongly discouraged.

Pan-American Ophthalmological Foundation
1301 South Bowen Road, Suite 365, Arlington, Texas 76013 USA
Telephone: (817) 275-7553 **Fax:** (817) 275-3961 **Email:** info@pao.org

PLEASE RETURN PAGES 4 and 5 BY EMAIL TO info@pao.org



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Type all Information

PAAO ID: _____ (please contact PAAO Office if you don't know your membership ID number)

Name of Applicant: _____
First Name, Middle Initial, Last Name(s)

Degree(s) _____
MD, PhD, etc.

Mailing Address: _____

City: _____ **State/Province:** _____

Country: _____ **Zip:** _____

Office Phone: (____) _____ **Fax Number:** (____) _____

Home Phone: (____) _____ **Birth Date:** mm / dd / yyyy

Email: _____ **Citizenship:** _____

Provide a small
passport style
photograph

Current Training Program: Complete contact information of the Department Chair or Program Director who is recommending you to for this scholarship.

Program Director/Department Chair: _____
First Name, Middle Initial, Last Name(s), Degree(s) (MD, PhD)

Institution: _____

Mailing Address: _____

City: _____ **State/Province:** _____

Country: _____ **Zip:** _____

Office Phone: (____) _____ **Fax Number:** (____) _____

Email: _____ **PAAO ID:** _____

Application Assurance:

- I understand that this is a one-time only fellowship award supported by Children's Medical Center and the University of Texas Southwestern via the Pan-American Ophthalmological Foundation.
- I understand that I must be or become an Active Member or Member-in-Training of the Pan-American Association of Ophthalmology.
- I understand that I must send a summary report, with photos, at the conclusion of my fellowship. These may be used for the Pan-American's newsletter *Vision Pan-America*. This must be sent to the attention of Dr. Juan Verdaguer, Chair of the PAAO Fellowships Committee. The report must be sent to Pan-American Ophthalmological Foundation, 1301 South Bowen Road, Suite 365, Arlington, Texas 76013.
- I am enclosing a current curriculum vitae (CV) with this application form with one (1) photograph.
- I am enclosing proof of English language proficiency.
- I am enclosing letters of recommendation from my Department Chair and/or Program Director.
- I am enclosing a letter outlining my interest to participate in this program.



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Membership in Honorary or Professional Societies, prizes, awards, fellowships, etc.

List of Publications (Omit if Included in CV)

EMERGENCY CONTACT INFORMATION (someone other than the applicant: parent, spouse, etc.)

Last Name (s)		First Name	
Email Address		Relationship to Applicant	
Physical Address (for contact by regular mail)			
City	State/Province	Zip Code	Country
Telephone (home)	Telephone (work)	Fax number	

AGREEMENT

I have read and accepted the above terms and responsibilities for a Pan-American Scholarship.

(A) I understand that noncompliance will be grounds for termination of the scholarship.

(B) I understand that I am obligated to return to my country of origin and submit a report on my activities during the scholarship stay.

(C) I further understand that I am obligated to become an Active Member or a Member-in-Training of the Pan-American Association of Ophthalmology.

I assume entire responsibility and hereby agree to protect, indemnify, defend, and save the Pan-American Ophthalmological Foundation (PAOF) and the Pan-American Association of Ophthalmology (PAAO) and their employees and agents, harmless against all claims, losses and damages to persons or property, governmental charges, or fines and attorney's fees arising out of or caused by my participation in the Latin American/PAAO Pediatric Ophthalmology Fellowship Program. In addition, I acknowledge and understand that the PAOF and PAAO do not obtain and maintain insurance and that it is my sole responsibility to obtain medical, malpractice, property, life, and travel insurances as deemed necessary by the fellowship program.

Applicant's Signature: _____ **Date** _____