1. Names of the
   a. Program director: Giorgio M. Aru, MD
   b. Chief(s) of cardiac division: Curt Tribble, MD
   c. Chief(s) of thoracic division: Pierre de Delva, MD

2. Program Contact information:
   Cathy J. Humphrey
   Address: 2500 North State St.
   Jackson, MS 39216-4505
   Phone: Office: 601-984-6603
   Fax: 601-984-5110

3. Link to your program’s website: http://surgery.umc.edu/professionals/residency/cardiothoracic/index.html

4. We would be happy to post relevant pictures regarding your program (3 pictures maximum).

University Hospital
University of Mississippi Medical Center
5. Indicate the # of residents accepted per year to your program: 1

6. Indicate the length of the program: 2 years

7. Does your program have separate cardiac and thoracic tracks? no

8. Indicate the approximate deadline for application and interview dates:
   a. Deadline: May 2013
   b. Interview dates: can be arranged individually

### CASE VOLUME

1. Please indicate the average number of cases per year performed in your program for the following ABTS categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Total Institution Cases</th>
<th>Total Cases per Resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of cardiac cases:</td>
<td>268</td>
<td>195</td>
</tr>
<tr>
<td>Total number of thoracic cases:</td>
<td>84</td>
<td>84</td>
</tr>
<tr>
<td>Congenital heart disease:</td>
<td>295</td>
<td>20</td>
</tr>
<tr>
<td>Acquired valvular heart:</td>
<td>72</td>
<td>40</td>
</tr>
<tr>
<td>Valve repairs:</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Myocardial Revascularization:</td>
<td>85</td>
<td>80</td>
</tr>
<tr>
<td>Aorta:</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Pneumonectomy, lobectomy, segmentectomy:</td>
<td>37</td>
<td>37</td>
</tr>
<tr>
<td>Esophagus resection:</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Benign Esophageal Disease:</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Heart transplants:</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Lung transplants:</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Ventricular assist device:</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Minimally invasive cardiac:</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

### CURRICULUM

1. Details of curriculum:
   a. Indicate the # of months on each rotation for each year (for each cardiac and thoracic track if applicable), and which hospital(s): The experience of the residents in each year is optimized to achieve the best educational opportunities day by day. However there is an emphasis on general thoracic in the first year and on adult cardiac in the second year.

   b. Please describe any opportunities for electives: Residents who develop a focused interest in one area or another may alter their schedules to achieve additional experience in that area. Rotations at other institutions may be arranged depending upon resident interest and career goals.

   c. Please describe any wet labs and simulation technology used in training and how frequently these are used: Four times a year we have a wet lab focusing on valve implantation in the aortic and mitral positions and valve repair as well as coronary revascularization.

   The Department of Surgery has a Simulation Center that was established in 2003. It affords all surgical residents 24-hour access year round. State-of-the-art laparoscopic and endoscopic simulators are available. Residents are proctored and progress at their own pace through the minimally invasive surgery curriculum, with operative opportunities linked into their simulator skills progression. A large textbook, CD-ROM and Video/DVD library of all laparoscopic techniques and procedures are available in the Surgery Simulation Center.

   d. Please briefly describe the number and type of weekly conferences residents are expected to attend:
      - Monday morning: combined cardiology and cardiac surgery conference
      - Tuesday morning: TSDA curriculum conference on thoracic topic of the week
Wednesday morning: departmental M&M conference and departmental grand rounds
Thursday morning: heart failure/transplant conference
Friday morning: TSDA curriculum conference on cardiac topic of the week

Weekly multidisciplinary lung conference at University and at VA, cardiology-cardiac surgery joint conference twice weekly, and congenital cardiac conference twice weekly.

e. Please indicate what provisions are made for attending national research meetings (i.e., # per year for which funding is provided, and if that is dependent on presenting an abstract): Each resident is allowed to attend one national meeting of his/her choice each year as long as they are in good standing within the residency program. In addition, the Department of Surgery supports each resident who is in good standing within their residency program and who has an accepted abstract for oral presentation to receive reimbursement in full for the meeting.

f. Please describe opportunities for research (clinical, basic science): There are numerous opportunities to perform clinical or basic science research with supervision by one or more of the attending faculty. Each year, we anticipate that papers will be published by residents and/or medical students in major national journals.

g. Please describe the call structure (i.e., frequency, in-house vs. home call): There is no in-house call by the residents, but the resident is expected to promptly respond from home to questions from the nursing staff or other residents. There is a night float system in which general surgery residents provide in-house coverage of the CT patients.

h. Please indicate whether funds are provided for loupes? Textbooks? Phones? A deposit of $250.00 is given to each resident per year into their resident book fund account, there is an additional deposit of $200 if the resident is in the 80th percentile or higher on the in-training exam. There is no charge for covered parking. The cost of a board review course in the first year of training is paid by the Department of Surgery.

2. Subjective:
   a. Please describe your program’s biggest strengths – The faculty is composed of 6 surgeons with an established track record in teaching and mentoring residents. One of the faculty is actively involved with the American Board of Thoracic. The faculty include: Curt Tribble, MD (Chief, Cardiothoracic Surgery & Vice-Chair, Surgical Education), Giorgio Aru, MD (Program Director and Surgical Director Heart Transplant Program), Lawrence Creswell, MD (Medical Director, Surgery), and Jorge Salazar, MD (Chief, Pediatric Cardiothoracic Surgery). In recent years our clinical volumes have grown dramatically.

   b. Please provide 1-2 adjectives that describe your program: Small program, totally dedicated to and supportive of the development of the resident.

   c. Please indicate what is unique about your program relative to other programs: The program is designed to foster the education and growth of the resident and is committed to make them an independent and efficient cardiothoracic surgeon. The environment is intimate and intense, but supportive and humanistic.

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**GRADUATES**

1. Indicate the percentage of graduates that do further training: 50%

2. Indicate the percentage of graduates that pursue academics vs. private practice: Academic: 20%

3. Please provide an account of job placement for your graduates over the last 3 years: N/A

4. Please describe “super” fellowship opportunities (e.g. transplant, endovascular, minimally invasive, congenital) available at your institution: None are available at the present time.
FUTURE CHANGES

1. Please indicate whether your program is planning on developing a Joint Thoracic/General Surgery (4+3) or Integrated Program (if your program already has one, please skip this section and complete the last portion of the questionnaire entitled “Additional questions for Joint Thoracic/General Surgery (4+3) and Integrated (i6) programs")? We are interested in these programs but do not plan to apply to either of them in the near future.

OTHER

1. Please elaborate on any other unique components of your program not captured in this questionnaire.

"The University of Mississippi has a great tradition of clinical care, teaching and research. Beginning with the renowned surgeon, Dr. James D. Hardy, who performed the first lung and the first heart transplants in history, the Department of Surgery at the University of Mississippi has successfully trained surgeons from all over the world. In addition, the research expertise of the renowned physiologist, Dr. Arthur Guyton, formed the foundation of our Physiology Department which maintains numerous important collaborations with the Department of Surgery. This unique combination of traditions has exposed developing cardiothoracic surgeons to a blend of surgical talent and investigative minds. Today our residents are heavily involved with pre-operative, intra-operative and post-operative care of the patients, and they also find time to prepare and present papers at surgical meetings during the course of their training."