



**Walter Reed  
National Military  
Medical Center**

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## **Orthopaedic Surgery Rotation**

Greetings,

Please submit the information below to the Residency Coordinator for processing. Upon receiving the completed information we will process the request and you will receive confirmation of your dates of attendance from the GME office. Please allow two (2) weeks for processing.

If your school and Walter Reed National Military Medical Center (WRNMMC) do not have a current Memorandum of Understanding (MOU) an agreement will need to be established. The process may take 3-4 months and we will not be able to accommodate your request until an agreement is executed between the facilities. The point of contact in the GME office is Ms. Naima Grove, ([naima.grove@med.navy.mil](mailto:naima.grove@med.navy.mil)).

### **Complete and Return the Form via Email or Fax**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Rank: \_\_\_\_\_ Branch of Service: \_\_\_\_\_

School: \_\_\_\_\_

MS Year: \_\_\_\_\_ III \_\_\_\_\_ IV Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_ Rotation Dates: \_\_\_\_\_

On AT Orders: \_\_\_ Yes \_\_\_ No Alternate Rotation Dates: \_\_\_\_\_

The GME office will send a confirmation email to the email address provided on this form.

**HPSP Students on AT Orders may not cross fiscal years 30-Sep-01 OCT.**

Please contact Ms. Natasha Jones with any questions:

Telephone: (301) 295-8588, Fax: (301) 319-2699, Email: [Natasha.Jones2@Med.Navy.Mil](mailto:Natasha.Jones2@Med.Navy.Mil)