We accept applications exclusively through the Electronic Residency Application Service (ERAS). The deadline for applications is November 30, but earlier submission is encouraged. All applications go through our screening process and are reviewed by residency faculty members.

Minimum criteria:
• We allow no more than four attempts on USMLE Steps 1 and 2 combined,
• no failures on Step 2 Clinical Skills exam,
• graduation within the past three years and some US clinical experience.

All applicants who meet these criteria go through our screening process and are reviewed by residency faculty members. Meeting our minimum criteria will allow the application to be reviewed. Interviews are granted based on the entire application, not on meeting our minimum criteria.

We accept H1 visas.
Interviews are conducted from mid October through January.
Salary (2018-2019)

Resident stipends for the academic year of 2018-2019 are as follows:

R1 $53,307  
R2 $55,000  
R3 $57,000  
Chief Resident $58,000

Additional benefits:

- Relocation allowance up to $1,500 (R1 and R2)
- iPad mini provided for each resident
- Use of laptop computer during residency
- Meals provided when on duty in the hospital
- Lab coats and laundry service
- Life insurance – 1× salary, with option to purchase additional term life coverage for spouse and children
- Health insurance
- Dental and vision insurance
- Tax-deferred voluntary savings plan
- Membership at the YMCA for resident and family
- Family leave
- Professional liability insurance coverage related to residency program duties
- Paid certification courses in ALSO, NRP, PALS and ACLS
- Twenty-one days of paid time off per year
- Five additional days per year available for conference attendance
- $700 (R1)/$1,200 (R2/R3) CME funding per year available for conference attendance, medical books or software
- Medical library with free photocopy privileges, subscription to MD Consult, First Consult and UptoDate
- Annual retreat
- Hospital call rooms provided
- Opportunity for certificate in public health

Outside employment is permissible with the consent of the program director. Residents must first obtain an Illinois permanent license.

Second-year and third-year residents can moonlight within the optional opportunities of the curriculum where there is supervision.
First Year Residency (R1)
Dixon RTT residents will spend their first year based in Rockford, coming to Dixon for Family Health Center (FHC) clinic sessions twice weekly on average.

**EMERGENCY MEDICINE — 1 block**
Application of ATLS and ACLS principles
Evaluate and treat emergency patients including trauma and severe illness
Supervision by certified emergency physicians

**FAMILY MEDICINE INPATIENT SERVICE — 3 blocks**
Responsibility for inpatient care of FHC and primary care clinic patients
General medicine patients who represent a typical family physician’s service
Daily rounds with senior resident and attendings
Supervised by senior resident and family medicine directors

**ICU — 1 block**
Learn to manage broad range of critical care problems
Mechanical ventilator management
Procedural skills including intubation, thoracentesis and placement of central and arterial lines

**INPATIENT PEDIATRICS — 1 block**
Hospitalist pediatricians as attending staff
Good case distribution with primary management responsibilities

**NEWBORN NURSERY/NICU — 1 block**
Work with neonatologists in Level II with exception nursery
Experience in resuscitation of neonates and preparation for transport

**OBSTETRICS — 3 blocks**
Delivery of 25 to 35 obstetrical patients per two months with experience in using forceps and vacuum extraction
Interaction between first-, second- and third-year residents on this service
Prenatal care experience in obstetrics clinic
Fetal monitoring training and certification
Provides source of new infant patient panel
Deliveries supervised by family physicians and obstetricians
Training in ultrasound

**PEDIATRIC EM/NICU — 1 block**
High volume peds ER
NICU level II and III experience
RENAL — 1 block
Supervised management of fluid and electrolyte disturbances in hospitalized patients with impaired renal functions

SPORTS MEDICINE/ORTHOPEDIC SURGERY — 1 block
Joint injections, workshops, fracture reduction, splints and casting

FAMILY HEALTH CENTER
First-year residents spend two half-days per week in the office
Supervision by full-time preceptors and board-certified family medicine preceptors
Videotaping and case reviews done regularly
Emphasis on health maintenance and patient-centered care

Second Year Residency (R2)
Portions of these rotations will extend into R3.

COMMUNITY MEDICINE — 1 block
An introduction to a variety of health-related resources and personnel in the Dixon area

ELECTIVE — 1 block

GENERAL SURGERY — 2 blocks
One-on-one service with a teaching surgeon
Emphasis on pre-op and post-op diagnosis and care
Opportunities to assist in surgery
Acquisition of technical skills—suturing, emergency surgical stabilization techniques and management of fluids, electrolytes, nutrition and pain control

ORTHOPEDICS — 1 block
Outpatient and inpatient orthopedics
Experience in management of acute musculoskeletal injuries and fractures
Ample opportunity to assist in surgery

DERMATOLOGY — 1 block
60 hours over 15 sessions
Participate in the office practice of a busy community teaching dermatologist

ELECTIVES
Elective experiences available in such disciplines as neurology, oncology, podiatry and others

EMERGENCY MEDICINE — 1 block
ENT
30 hours
One-on-one teaching in ENT office

GYNECOLOGY
100 hours
One-on-one in the office of an active community teaching OB/GYN
Arranged to concentrate on GYN cases (rather than OB) during times when a resident is present
Surgical opportunities as appropriate

MEDICAL IMAGING
30 hours
Gain experience in medical image interpretation
Understand the imaging technology available in the small community hospital

OPHTHALMOLOGY
30 hours
Gain experience in the office practice of ophthalmology

ORTHOPEDICS — 1 block
Outpatient experience with emphasis on office practice
Experience in the management of acute musculoskeletal injuries and fractures
Surgical opportunities as appropriate

PRACTICE MANAGEMENT
100 hours
Learn what must go on behind the scenes to support an active family medicine practice

UROLOGY
30 hours
Learn outpatient office urology procedures and techniques

FAMILY HEALTH CENTER
3 half-days per week in clinic
Further development of a panel of clinic patients
Increased office procedures
Videotaping and case reviews done regularly

Third Year Residency (R3)

CARDIOLOGY — 1 block
Emphasis on diagnosis and management of heart disease
One-on-one with cardiologist
Acute, chronic, and preventive aspects of cardiac care

ELECTIVES — 3 blocks
Devoted to specific interests of residents
Elective experiences can be arranged in any location and in any discipline
GASTROENTEROLOGY — 1 block
One-on-one in gastroenterology practice
Endoscopy experience according to resident interest
Extensive outpatient and inpatient experience

PEDIATRICS — 1 block
An extension of PGY II experience, with increasing responsibility for case management

PULMONARY MEDICINE — 1 block
One-on-one service with pulmonologist
Experience in pulmonary diagnosis and treatment; ventilator management
Wide range of inpatient and outpatient contact

FAMILY HEALTH CENTER
Third-year residents spend three to four half-days per week in the Town Square Family Health Center further
developing a panel of clinic patients
Increased emphasis on office procedures

Curriculum is subject to revision by the American Board of Family Medicine and the Accreditation Council for
Graduate Medical Education (ACGME).
Family Medicine Residents 2018-2019

FIRST YEAR
Paige Clayton, MD
Michael Greer, MD

SECOND YEAR
Samantha Stiff, MD
Amanda Griesbaum, MD

THIRD YEAR
Khyati Kadia, MD
Kendall Vogeler, MD

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Dixon Rural Training Track Faculty Members

Gregory Reckamp, MD, Program Director
Clinical Assistant Professor in the Department of Family and Community Medicine
Dr. Reckamp earned his medical degree at the University of Illinois College of Medicine Rockford and completed his family medicine residency at St. Mary’s Hospital/University of Wisconsin in Madison, Wis. He has been practicing full-spectrum family medicine in Oregon, Ill., since 1998. He became the assistant program director at the Dixon Rural Training Track in 2010. Dr. Reckamp is involved in many community activities, including being a member of the Ogle County Board of Health, and medical director of the Oregon Living and Rehabilitation Facility.

Emilee Bocker, MD
Clinical Assistant Professor in the Department of Family and Community Medicine
Dr. Bocker earned her medical degree through the Rural Medical Education (RMED) Program at the University of Illinois College of Medicine Rockford. She completed her family medicine residency at the University of Illinois College of Medicine Rockford Dixon Rural Training Track.

Kurt Crowe, MD
Clinical Instructor in the Department of Family and Community Medicine
Dr. Crowe earned his medical degree at the University of Illinois College of Medicine and completed his residency at the University of Illinois College of Medicine Rockford Family Medicine Residency program.

Debra C. Drengenberg, MD
Clinical Assistant Professor in the Department of Family and Community Medicine
Dr. Drengenberg earned her medical degree at the University of Illinois College of Medicine Rockford and completed her family medicine residency at the University of Wisconsin in a rural training track.

Juan Hernandez, MD
Clinical Assistant Professor in the Department of Family and Community Medicine
Dr. Hernandez earned his medical degree at Universidad Del Zulia in Venezuela and completed his residency at the University of Illinois College of Medicine Rockford Family Medicine Residency program.
Sameer S. Jain, MD  
Clinical Assistant Professor in the Department of Family and Community Medicine  
Dr. Jain earned his medical degree at Government Medical College in India and completed his family medicine residency at the University of Illinois College of Medicine Rockford Dixon Rural Training Track.

Joyce Johnson, MD, Assistant Director  
Clinical Assistant Professor in the Department of Family and Community Medicine  
Dr. Johnson earned her medical degree at the Medical University of the Americas, St. Kitts and Nevis. She completed her family medicine residency at the University of Illinois College of Medicine Rockford/Dixon Rural Training Track.

Mark K. Myers, MD  
Clinical Assistant Professor in the Department of Family and Community Medicine  
Dr. Myers earned his medical degree at the University of Illinois College of Medicine Rockford and completed his family medicine residency at the University of Wisconsin/St. Mary's Hospital Medical Center.

Poonam Sachdev, MD  
Dr. Sachdev earned her medical degree at Government Medical College in India and completed her family medicine residency at the University of Illinois College of Medicine Rockford Dixon Rural Training Track.

Joseph M. Welty, MD  
Clinical Assistant Professor in the Department of Family and Community Medicine  
Dr. Welty earned his medical degree from the University of Illinois College of Medicine Chicago and completed his family medicine residency at MacNeal Memorial Hospital in Berwyn, Ill.
Dixon is located along the scenic Rock River in Northwestern Illinois. It’s a community full of history, recreational opportunities and other amenities that reflect the high standards representative of Midwestern life.

Often touted as a great place to raise a family, Dixon is home to outstanding schools and parks. More than 100 physicians in a variety of specialties meet Dixon’s medical needs. KSB Hospital is the area’s highly rated hospital, established in 1897. Sauk Valley Community College is Dixon’s institution of higher learning.

A bustling community of 16,000 at the hub of four major highways and Interstate 88, Dixon serves as the county seat of Lee County. In addition, Dixon is a major economic center in the county and an important focus for agriculture, industry, service, retail and residential growth.

In 1828, Joseph Ogee claimed and settled the site of what is now known as Dixon. Two years later, “Father” John Dixon came to the area, purchased Ogee’s land claims and continued the establishment of the settlement by operating a ferry across the beautiful Rock River on the busy Peoria-Galena Trail.

In 1832, a young Abraham Lincoln marched into Dixon as captain of the Sangamon County volunteers. He and his troops were mustered in at Fort Dixon to fight in the Blackhawk Indian Wars. Fort Dixon was located on the north bank of the Rock River, where the spot is now marked with a bronze statue of Lincoln, operated as an Illinois State Memorial.

It is hard to think of Dixon without associating the name of her most famous son, Ronald Wilson Reagan. The former president is well known for calling Dixon his hometown and spent his formative years in Dixon attending its schools and spending summers as a lifeguard at the Lowell Park Beach. Dixon was instrumental in forming the character of the 40th United States president. Today, many Reagan sites, including the Ronald Reagan Boyhood Home, are visited by thousands of tourists.
Katherine Shaw Bethea Hospital (KSB) is committed to providing high-quality, compassionate care with the latest technology, a mission it has been pursuing since 1897. KSB Hospital continues to deliver the finest in health care services to its communities. This commitment has been validated with back-to-back outstanding patient experience awards and a quality excellence accolade from the Illinois Hospital Association. KSB is achieving its goal of being the best place for patients to receive care, not only at the main hospital campus but also at Commerce Towers, Town Square Centre and our six satellite clinics – Edwards, Amboy, Ashton, Oregon, Polo and Mt. Morris.

The hospital’s own KSB Medical Group, which staffs all of the KSB facilities, has grown to more than 80 physicians in a multi-specialty practice. From family medicine and obstetrics to neurology, from cardiology to orthopedics, KSB Hospital also is committed to being the best place for physicians to practice.

In addition to the broad selection of physicians, KSB Hospital also is growing physically to meet the needs of the community. We have invested in the latest diagnostic radiology equipment and a state-of-the-art cardiovascular catheterization laboratory. KSB recently doubled the size of its Emergency Department and Day Surgery area, adding 30,000 square feet to the main building. With 13 exam rooms and two triage rooms, KSB Hospital’s ER is equipped to provide timely, efficient emergency medical services.

KSB Hospital is an 80-bed acute care facility offering a variety of ancillary services, including

- 24-hour emergency care
- Medical/surgical services
- Radiology
- Behavioral health services
- Cardiac rehabilitation
- Cardiac catheterization
- Home care
- Intensive care
- Obstetrics
- Pediatrics
- Laboratory services
- Physical therapy
- Sleep lab
- Sports and occupational medicine
- Surgery
The University of Illinois College of Medicine Rockford offers a rural family medicine clerkship to fourth-year students from LCME-accredited medical schools and from selected WHO-affiliated international medical schools in Dixon, Ill, in affiliation with KSB Hospital.

Under its affiliation with the University of Illinois College of Medicine Rockford, the faculty of the Dixon Rural Training Track provide supervision for this four-week experience. Students will obtain an overview of family medicine as it is practiced in a smaller hospital in a rural setting. Students will be primarily assigned to an attending family medicine physician of their choosing. In the Dixon area there are several such family physicians of varying ages, practice locations and gender from whom to select.

Students will be involved with patient care activities to the extent of their clinical abilities in both the outpatient family medicine office and with inpatients at KSB Hospital in Dixon. The clerkship may be tailored to the specific needs and interests of the student.

The Dixon RTT fourth-year clerkship is intended to provide experience in or exposure to:

- Concepts of screening, prevention and health maintenance
- Managing common problems in ambulatory family medicine
- Methods and goals of patient education
- The practice of family medicine outside of the office
- Common office procedures and clinical skills
- Principles and practice of continuing care
- Ability to integrate patient care with knowledge of the natural history of health and disease
- An appreciation of the special strengths and challenges of family medicine as practiced in a rural setting

Evaluations of the students are completed by precepting faculty. These will identify progress and problems during the clerkship and the degree of mastery the student has achieved at the end of the experience. Evaluation forms are submitted to the clerkship coordinator in Rockford, who will complete a composite evaluation in conjunction with the student. These forms are then sent to the medical education office of the student’s school.