



**Boston University** Chobanian & Avedisian School of Medicine  
**Boston Medical Center**

Department of Urology  
725 Albany Street, Suite 3B  
Boston MA 02118  
Tel: 617-638-8485  
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**Fellowship in Sexual, Reproductive and Transgender Medicine and Surgery**  
**Boston University School of Medicine**

**Identification:**

Name:  
Last Name:  
Email:  
Phone number:

**Education:**

Urology Residency:  
Graduation year:

**Required documents:**

Successful completion of an ACGME accredited Urology Residency Training Program.  
Applicant must qualify for a Massachusetts Medical License.  
Demonstrates evidence of excellence in academic, clinical and research endeavors.  
Curriculum vitae:  
Letters of recommendation: 2

**Please submit CV and letters of recommendation to: [munarriz@bu.edu](mailto:munarriz@bu.edu)**

Ricardo Munarriz, MD  
Professor of Urology  
Boston University Chobanian and Avedisian School of Medicine  
Director of The Center for Sexual Medicine  
Director of the Sexual, Reproductive and Transgender Medicine and Surgery Fellowship