

Icahn
School of
Medicine at
Mount
Sinai

Internal Medicine Residency Program at The Mount Sinai Hospital

2018-19

The Samuel Bronfman Department of Medicine



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Introduction To Our Program



Dear Senior Medical Student:

The Internal Medicine Residency Program at The Mount Sinai Hospital produces the highest quality physicians and physician-scientists through a residency program that emphasizes intellectual curiosity, compassion and camaraderie. Our goal is to create doctors capable of both clinical excellence and academic leadership.

Upon completion of their training, our physicians will have a solid clinical foundation, an exposure to world-class medical research and the tools to thrive within the constantly evolving landscape of medicine. The days of one-size-fits-all education have passed. Divergent and wide-ranging career paths, including outpatient primary care or specialty practice, hospital medicine, clinical and translational research, and global health, all require focused attention during training.

We have created numerous platforms within our residency program to allow physicians-in-training to shape a learning experience tailored to their own individual career plans. In addition to our various trajectories detailed in the Education Tracks section of this brochure, there are many opportunities through research, elective selection and other activities for residents to pursue their interests.

The Internal Medicine Residency Program, with its strong emphasis on clinical experience in diverse settings, includes three different primary hospitals. Approximately two-thirds of our residents' training is spent at The Mount Sinai Hospital. This facility provides tertiary care to patients referred for the diagnosis and treatment of uniquely complex medical problems, as well as primary and secondary care for residents of the Upper East Side and East Harlem. One-third of the residency is spent off-campus at the James J. Peters Veterans Affairs Medical Center in the Bronx and the Elmhurst Hospital Center in Queens. By rotating through these three facilities, our residents are exposed to both unique patient populations and complex cases that many trainees don't see until well into their post-graduate education. In addition, our residents will have the added benefit of being part of the Mount Sinai Health System, which provides them with increased opportunities for training at locations throughout New York City.

We expect our graduates to finish with a well-balanced, solidly grounded education in evidence-based medicine. In order to accomplish this, all residents develop and complete a research project during their training. Residents have numerous opportunities to work alongside internationally renowned basic science and translational researchers on the latest areas of scientific discovery like inflammation, personalized medicine and the integration of big data into population health management. Our residents are published in major scientific journals and present at medical conferences both nationally and internationally. In addition, we have an outstanding mentoring program that provides support and guidance along with continuity from one generation of physicians to the next.

Ultimately, this residency program is designed to create a foundation for excellence in patient-centered clinical care upon which lifelong learning may take place. We know that our trainees will become outstanding general internists regardless of their subsequent career plans.

If your personal and career goals include a desire to make a difference in the lives of a diverse patient population, and if you possess the passion to help your patients and your community while contributing to the advancement of medicine, we hope you will consider joining us in our mission.

Salvatore Cilmi, MD

Program Director, The Mount Sinai Hospital

David C. Thomas, MD, MHPE

*Vice Chair for Education, Department of Medicine
Mount Sinai Health System*

Barbara Murphy, MD

*Chair, Department of Medicine
Mount Sinai Health System*



Why Choose Mount Sinai



Let's face it – trying to decide where to spend your residency can be complicated and numerous factors play a role in that decision. But here at Mount Sinai, we offer a potent combination of a top-notch medical education, the opportunity to work with some of the world's best clinicians and researchers, and robust career development and mentoring. Plus, we are based in the greatest, most intellectually and culturally vibrant city in the world.

We encourage you to read in-depth about each of the following areas: our reputation, our location, the diversity of your training experience, our distinguished faculty, career development, our unique curriculum and diversity of our trainees.

REPUTATION

The Internal Medicine Residency Program at the Icahn School of Medicine is ranked in the top 25 of all medicine residency programs in a nationwide survey of Department Chairs and Program Directors. The Icahn School of Medicine also ranks in the top 25 of all accredited U.S. Medical Schools, according to the 2018-19 *U.S. News & World Report* annual survey on "America's Best Graduate Schools." We are also 10th in NIH funding nationwide, according to the Blue Ridge Institute for Medical Research.

In its "Best Hospitals" issue for 2018-19, *U.S. News & World Report* ranked multiple divisions in the Department of Medicine as leading locations for

subspecialty care, including Geriatrics, Gastroenterology, Cardiology, Nephrology and Diabetes and Endocrinology. These rankings exemplify our commitment to patient care and the education of our trainees.

But these statistics don't tell the whole story. Our program is considered by national leaders in medical education to be highly rigorous, providing excellent foundational training for any subspecialty in a highly supportive environment.

LOCATION, LOCATION, LOCATION

Mount Sinai is unique because it is located at the crossroads of one of the richest areas in the United States and one of the poorest. This nexus allows for an amazingly diverse patient population that is both highly demanding and highly in need of medical services. And this offers you a unique opportunity for your training—one that most physicians don't get in the entire span of their careers.

And of course, as a resident at Mount Sinai you will live in New York City—one of the greatest, most diverse and exciting cities in the world. Physically, our main campus is right next to Central Park, which provides a quick escape into natural beauty for runs, walks, bike rides or just relaxation. Trainees can participate in all the cultural and recreational activities that New York City can offer: theater, museums, music, restaurants, and sporting events.



DIVERSITY OF EXPERIENCE

With three main training locations, residents are exposed to a wide array of patients that most trainees don't see until later in their careers.

The Mount Sinai Hospital: Founded in 1852, The Mount Sinai Hospital is a 1,171-bed urban hospital known internationally for delivering the most sophisticated and advanced medical care available. The Mount Sinai Hospital provides primary and secondary care to local residents, as well as tertiary care to patients referred from around the world. Located on the borders of East Harlem, one of the poorest communities in the nation, and the Upper East Side, one of the wealthiest, Mount Sinai attracts an incredibly diverse patient population.

Elmhurst Hospital Center: Elmhurst Hospital is a 618-bed municipal hospital located in Queens. It maintains a tight affiliation with Icahn School of Medicine at Mount Sinai and many residents spend time at this facility. Elmhurst Hospital Center is located in the most ethnically diverse square mile in the world. There are over 100 translators on staff at Elmhurst for nearly 85 different languages. Because of this unique patient population, Elmhurst offers a very special opportunity to care for patients with diseases rarely seen in other hospitals in the United States. The hospital provides all levels of care to over one million residents of Western Queens. The emergency room and outpatient clinics are among the busiest in New York City.

James J. Peters Veterans Administration Medical Center: The VA Medical Center in the Bronx is the oldest VA facility in New York City, celebrating over 75 years of service to those who have served our country. Today the VAMC has 311 hospital beds and 120 nursing home beds and operates several regional referral points including a Spinal Cord Injury Unit. The rotation experience at the VMAC offers its unique patient population for teaching particularly in the fields of psychiatry, physical medicine and rehabilitation, neurology, oncology, geriatrics and palliative and extended care.

OUR FACULTY

As a resident in the Department of Medicine at Mount Sinai, you will work with and be mentored by an amazing group of physicians. We a team of the leading clinicians, physician-scientists and researchers who will play an integral part in your development as a physician. You will have the chance to work with them on cutting-edge research and bringing those discoveries into the clinical arena. The following is a sampling of our faculty:

Clinical Immunology



Dr. Charlotte Cunningham-Rundles is Professor and Interim Chief of the Division of Clinical Immunology. She is best known for her research into human immunodeficiency diseases and immuno-reconstitution.

Cardiology



Dr. Valentin Fuster is Professor and Chief of the Division of Cardiology, the Director of Mount Sinai Heart and the Physician-in-Chief of The Mount Sinai Hospital. He is an internationally renowned clinician and researcher. He is former President of the American Heart Association and the only cardiologist to receive all four major research awards from the four major cardiovascular organizations. He is the lead editor of two major cardiovascular textbooks, Hurst's *The Heart and Atherothrombosis* and *Coronary Artery Disease*.



Dr. Jonathan Halperin is Professor of Medicine and Director of Clinical Cardiology Services. He was a principal researcher on the Stroke Prevention in Atrial Fibrillation (SPAF) clinical trials. He sits on national panels that issue clinical guidelines for management of patients with various cardiovascular diseases including atrial fibrillation and peripheral arterial disease.



Dr. Vivek Reddy is Professor of Medicine and Director of the Cardiac Arrhythmia Service. He is one of the nation's leading cardioelectrophysiologists. He has performed cutting-edge research on treatment of arrhythmias including the seminal SMASH-VT trial and the first use of balloon cryoablation in atrial fibrillation.

Endocrinology, Diabetes and Bone Disease



Dr. Andrea Dunaif is Professor and Chief of the Division of Endocrinology, Diabetes and Bone Disease. She is an internationally known researcher in women's health and leads an international effort to map the genes for polycystic ovary syndrome (PCOS), a leading cause of diabetes in women.



Dr. Ronald Tamler is Associate Professor of Medicine and Director of Digital Health Implementation for the Mount Sinai Health System. He is an expert in diabetes and develops case-based educational modules for residents on management of hyperglycemia.



Dr. Richard Haber is Professor of Medicine and an expert in thyroid nodules and thyroid cancer. He conducts research investigating accuracy of fine needle aspiration and utility of neck ultrasound for pre-operative localization of parathyroid glands.

Gastroenterology



Dr. Bruce Sands is Professor and Chief of the Dr. Henry D. Janowitz Division of Gastroenterology. He is an expert in inflammatory bowel disease (IBD) and was among the first to report the efficacy of infliximab in treating Crohn's disease and ulcerative colitis.



Dr. Jean-Frédéric Colombel is Professor of Medicine and Director of the Leona M. and Harry B. Helmsley Charitable Trust Inflammatory Bowel Disease Center. He is an internationally renowned researcher best known for his identification of the NOD2 as a susceptibility gene for Crohn's disease.



Dr. Judy Cho is Professor of Medicine, Professor of Genetics and Genomic Sciences and Asst. Chief of Research in the GI Division. She most recently led a team of researchers that confirmed 92 genome regions and identified 71 new regions associated with increased risk of IBD.

General Internal Medicine



Dr. Juan Wisnivesky is Professor of Medicine and Chief of the Division of General Internal Medicine. His population health-based research in asthma, COPD and cancer outcomes has been featured in journals such as *Archives of Internal Medicine*, *BMJ*, and *The Lancet*.



Dr. David C. Thomas is Professor of Medicine, Medical Education and Rehabilitation Medicine along with Vice Chair of Education for the Department of Medicine. Dr. Thomas is an expert in musculoskeletal medicine. He presents internationally on medical education topics as they relate to residency training.

Geriatrics/Palliative Medicine



Dr. Albert Siu is Professor and Chair Emeritus of the Department of Geriatrics and Palliative Medicine. Dr. Siu conducts research on functional status and disability in aging. He is chair of the United States Preventive Services Task Force (USPSTF) and is a Director of the Visiting Nurse Service of New York.



Dr. Rosanne Leipzig is Professor of Geriatrics and Palliative Medicine. She is a national leader in geriatric education and evidence-based medicine. She serves on the United States Preventive Services Task Force (USPSTF) and is currently on the National Board of Medical Examiners.



Dr. Linda DeCherrie is Associate Professor of Geriatrics and Clinical Director of the Mobile Acute Care Team (MACT), Mount Sinai's Hospital at Home Program. Her clinical and research interests are medical education in chronic care of complex frail patients in the ambulatory setting and innovative models of care.

Hematology/Oncology



Dr. William Oh is Professor and Chief of the Division of Hematology and Medical Oncology. He is a leader in prostate cancer research, serving as principal investigator on multiple clinical trials and developing more accurate methods of screening for prostate cancer.



Dr. Janice Gabrilove is Professor of Medicine and has conducted pioneering research in hematopoietic growth factors that initially isolated and characterized granulocyte colony stimulating factor (G-CSF).



Dr. Bart Barlogie is Professor of Medicine and Director of Myeloma Research at the Tisch Cancer Institute. He introduced the first curative therapy, a multi-drug regimen known as Total Therapy, for multiple myeloma.

Hepatology



Dr. Scott Friedman is Professor and Chief of the Division of Liver Diseases (one of the few free-standing Hepatology divisions in the nation), as well as Dean for Therapeutic Discovery. Dr. Friedman performed pioneering research that first isolated hepatic stellate cells, which are key for scar production in liver. He is former President of the American Association for the Study of Liver Diseases (AASLD).



Dr. Douglas Dieterich is Professor of Medicine and and Director of the Institute for Liver Medicine. He is a major investigator of new antiviral treatments for chronic hepatitis B and C.

Hospital Medicine



Dr. Andrew Dunn is Professor and Chief of the Division of Hospital Medicine. Dr. Dunn's research interests are in anticoagulation and thrombosis, most specifically in venous thromboembolism, atrial fibrillation, and the perioperative management of warfarin. He was until recently Chair of the Board of Governors of the American College of Physicians and is chair of the Board of Regents of the ACP.

Infectious Diseases



Dr. Judith Aberg is Professor of Medicine and Chief of the Division of Infectious Diseases. Her research focus is HIV-associated co-morbidities and coinfections. She has been actively involved in the development of national, state and local guidelines regarding HIV prevention and treatment.



Dr. Michael Mullen is Professor of Medicine and Director of the Institute for Advanced Medicine for the Mount Sinai Health System. Dr. Mullen is an expert in the treatment and prevention of HIV/AIDS as well as other infectious diseases.



Dr. Benjamin K. Chen is Professor of Medicine and Vice Chair for Research for the Department of Medicine. Dr. Chen's primary interest is in the pathogenesis of HIV-1 infection and how cell-to-cell transmission of the virus contributes to disease. He also leads the Department of Medicine's junior faculty mentoring program.

Nephrology



Dr. Barbara Murphy is Professor and Chair of the Department of Medicine. She is internationally known for her work in transplant immunology. Her research has focused on the role of genomics in determining outcomes in transplantation. She is a counselor of the American Society of Nephrologists and a former President of the American Society of Transplantation and was named Nephrologist of the Year by the American Kidney Fund in 2011.



Dr. Cijang He is Professor and Chief of the Division of Nephrology. His major research areas include podocyte biology and pathology, signaling networks in kidney cells, systems biology of kidney disease, and kidney fibrosis. His major clinical interest includes diabetic kidney disease, viral-induced kidney disease, and primary glomerular disease.



Kirk Campbell, MD is Associate Professor of Medicine and Vice Chair for Diversity and Inclusion for the Department of Medicine. His area of research is in the role of kidney podocytes in the development of glomerular disease.



Pulmonology



Dr. Charles A. Powell is Professor and Chief of the Pulmonary, Critical Care, and Sleep Medicine Division. He is a leader in translational research in lung cancer, investigating the effect of molecular and genetic profiles on cancer development and prognosis.



Dr. Maria Padilla is Professor of Medicine and an expert in Interstitial Lung Disease (ILD) who serves on multiple national committees including the ILD Network of the American College of Chest Physicians. Her research investigates fibrogenesis and new treatment strategies for ILD.

Rheumatology



Dr. Percio Gulko is Professor and Division Chief of Rheumatology. He is an expert in rheumatoid arthritis and focuses his work on the identification and characterization of new genes implicated in the regulation of the disease's severity.



Dr. Margrit Wiesendanger is Assistant Professor of Medicine and Program Director for the Rheumatology Fellowship. An expert on autoimmune diseases, she has received several awards, including the prestigious Daniel V. Kimberg Memorial Junior Faculty Teaching Award and the Ewig Clinical Scholar Award.

CAREER DEVELOPMENT

At Mount Sinai, we provide a well-rounded and comprehensive training program that encompasses all aspects of academic medicine. We consider it a point of pride that so many of our residents have not only published major papers by the time they leave us, but also end up in prestigious fellowship programs throughout the country and around the world.

Career Mentoring: Upon arrival, each intern is assigned an advisor within the program to provide semi-annual feedback including review of evaluations and career goals. This person serves as a mentor for your professional development throughout your three years at Mount Sinai. Seminars for residents regarding fellowship applications as well as future career planning are held regularly.

Research Opportunities: Under the direction of clinical and basic science research directors, research opportunities with world renowned faculty abound at Mount Sinai. Residents are required to participate in scholarly activity during the course of their training. The Department of Medicine ranks in the top 10 of NIH-funded academic medicine departments. A state-of-the-art core facility in genomic and proteomic medicine has facilitated the development of a broad Personalized Medicine Program that crosses all subspecialties and is centered in the Department of Medicine. Department of Medicine faculty are involved in the latest basic and translational science, drawing

on resources from throughout the Mount Sinai Health System. Our residents become an integral part of the discovery process in areas such as immunology/immunotherapy, fibrosis, inflammation, the study of the microbiome and ultimately how big data can be used to produce individualized therapies and treatments for patients suffering from a range of diseases.

Starting in internship, you will meet with our APDs for research, who will connect you to a research mentor who shares your particular interests. A directory of research opportunities is published annually by the Icahn School of Medicine at Mount Sinai with specific references to the research projects that welcome housestaff as participants. Research opportunities are also available in areas closely linked to primary care such as outcomes and quality of care research. Housestaff research efforts culminate in a Department of Medicine Research Day each spring when residents present their data in oral and poster format. A guest speaker is chosen each year to demonstrate the evolving role of translational science.

Clinical Electives: The elective months are an important part of the resident's training. Not only

can they help enrich the general medical training, but they can help residents gain insight into possible future careers. The Department of Medicine offers electives in Cardiology, Clinical Immunology, Endocrinology, Gastroenterology, General Internal Medicine, Geriatrics and Palliative Care Medicine, Hematology/Oncology, Hospital Medicine, Infectious Diseases, Liver Diseases, Medical Informatics, Nephrology, Pulmonary Medicine/Critical Care and Rheumatology. Residents can choose either inpatient consult or outpatient electives.

Fellowship and Beyond: A large majority of our residents successfully compete for the most prestigious fellowship positions. During fellowship applications, each resident is also assigned to a faculty mentor in their specialty of choice to help them with the challenges of applying to competitive fellowships. For the residents choosing to remain in primary care, we make special efforts to find general medicine fellowships for those wishing to gain further expertise or pursue careers in academic medicine. Additionally, the Department of Medicine continues to work with its residents beyond their period of training, assisting them with career decisions after residency.



UNIQUE CURRICULUM

As a member of Mount Sinai's Internal Medicine Residency Program, you will have the chance to take part in unique medical curricula, which will further enhance your education. We have three main programs that are woven into your day-to-day training: Advancing Idealism in Medicine, Quality Improvement and Evidence-Based Medicine

Advancing Idealism in Medicine: The Advancing Idealism in Medicine (AIM) program was initiated several years ago by the Internal Medicine housestaff. The program seeks to support and advance idealism in medicine during the demanding years of residency training. AIM enables residents to reframe how they perceive their patients, their profession and themselves. Through lectures, lunch discussions on topics such as wellness, and opportunities for advocacy throughout the community, the department provides many means for our residents to integrate humanism into the practice of medicine.

Quality Improvement: The ever-changing landscape in American health care requires that we train future leaders who have a firm foundation in the concepts of quality improvement and patient safety. Housestaff officers are exposed to the following throughout their training:

- A monthly conference to highlight medical errors and discuss them openly and without blame while performing a root cause analysis;
- Quality improvement and patient safety projects that are actively encouraged and mentored in the housestaff quality committee; grant funding is available for quality-related research projects;
- Metrics with the same objective outcomes and operational goals which our attendings receive each month, such as mortality, length-of-stay and readmission rates.

Evidence-Based Medicine: Our training program emphasizes evidence-based medicine (EBM). The multiple components of our EBM curriculum are woven into the overall



residency to optimize learning and retention. The EBM curriculum emphasizes skills in critical appraisal, filtered resource utilization and evidence summary. It includes small group journal clubs for interns and residents during outpatient rotations, EBM seminars for residents, small seminars in cost-effectiveness analysis and incorporation of EBM skills into inpatient morning report with daily presentation and critique of relevant articles.

DIVERSITY

The Mount Sinai Hospital is located on the border of East Harlem, a community that has historically drawn new immigrants to New York City. The majority of

East Harlem residents today belong to ethnic or racial groups that have traditionally been underrepresented in medicine. We want our physicians who provide exceptional care to that community to also reflect its diversity.

Training future leaders to address racial and ethnic disparities within medicine expands Mount Sinai's and the department's talent pool and helps improve health care access, quality of care, and health policy for underserved communities.

The Department of Medicine's aggressive agenda for diversity goes beyond recruitment. Programmatic innovations focus on enhancing

professional experiences and growth for our faculty and housestaff members from underrepresented minorities. For example, we have a mentoring program for underrepresented minorities who are paired with faculty members who guide their professional development throughout their training.

Research opportunities are available to address health care disparities, public policy, and issues in cultural competencies. Through the Health System and in collaboration with the Office for Diversity & Inclusion, we provide additional resources, such as writing and financial literacy workshops as well as access to professional coaching, to enhance the training environment and career development for housestaff. To accomplish these goals and provide equal opportunities, we are committed to attracting those who historically have had difficulty entering the medical professions.

For more information regarding diversity issues or questions, please email the following people:

Diversity Coordinators:

Kirk Campbell, MD: kirk.campbell@mssm.edu

Cardinale Smith, MD: cardinale.smith@mssm.edu

Women in Medicine:

Rose Yu, MD: rose.yu@mountsinai.org

Emily Gallagher, MD, PhD: emily.gallagher@mountsinai.org

LGBT in Medicine:

Robert Dewar, MD: robert.dewar@mountsinai.org

Emily Carroll, MD: emily.carroll@mountsinai.org

Joseph Rinaldi, MD: joseph.rinaldi@mountsinai.org

Darren Pan, MD: darren.pan@mountsinai.org

Samira Farouk, MD: samira.farouk@mountsinai.org

David C. Thomas, MD, MHPE: david.thomas@mountsinai.org

Eric Barna, MD: eric.barna@mountsinai.org



Education Tracks



The Samuel Bronfman Department of Medicine's Residency Program focuses on the clinical skills, knowledge, leadership and humanistic qualities of the internist.

There is an abundant amount of formal instruction throughout our training program. This includes an emphasis on developing each resident's teaching and leadership skills. All inpatient and outpatient rotations have daily educational activities designed to constantly reinforce your training. We have created a residency curriculum based on a weekly interactive seminar series, one for interns and one for residents. Each weekday, Morning Report led by the program director and the chief residents is a venue where residents discuss general case management and the evidence that supports their clinical decision-making. Medical Grand Rounds is a weekly conference that addresses major current issues in translational science, current medical practices, ethics, or education. Speakers are selected from the Sinai faculty as well as external visiting professorships.

A weekly Intern Report allows PGY1s to hone their presentation and differential diagnosis skills and review the literature on selected topics. Resident Report focuses on subspecialty case presentations to faculty selected by the residents. Several additional conferences add to the educational environment including peripheral blood smear rounds with Dr. Barry Collier, former Chair of Medicine and current Vice President of Medical Affairs at Rockefeller University, and cardiac bedside rounds with Dr. Valentin Fuster, Chairman of Mount Sinai Heart.

Our training program is designed as a 6 + 2, inpatient-to-outpatient schedule. On the inpatient side, our wards are made up of six general medicine teams, with four specialty teams (ID, Oncology, Cardiology and Liver Medicine). Each team, supervised by an attending physician, is made up of two interns and two additional residents who care for a maximum of 20 patients. This ensures that our trainees receive the best educational experience while guaranteeing the highest level of patient safety and care. Most recently we have designed an educational night medicine rotation which allows overnight residents to admit patients to each of these teams and provide continuity of care with the day teams the next morning.

On the outpatient side, residents spend a significant part of their training at Internal Medicine Associates (IMA). This diverse, high-volume outpatient primary care clinic draws its patients from East Harlem and the Upper East Side. There, we have a system where residents are precepted by two attending physicians for their entire residency, providing superlative continuity of care for the patients and longitudinal feedback for our trainees. Our residents also participate in regular outpatient team meetings, giving them the opportunity to contribute directly to improving the overall patient care experience at IMA. Additionally, residents rotate through Mount Sinai's Visiting Doctors Program, one of the largest in the country, conducting home visits throughout Manhattan.

CATEGORICAL RESIDENCY

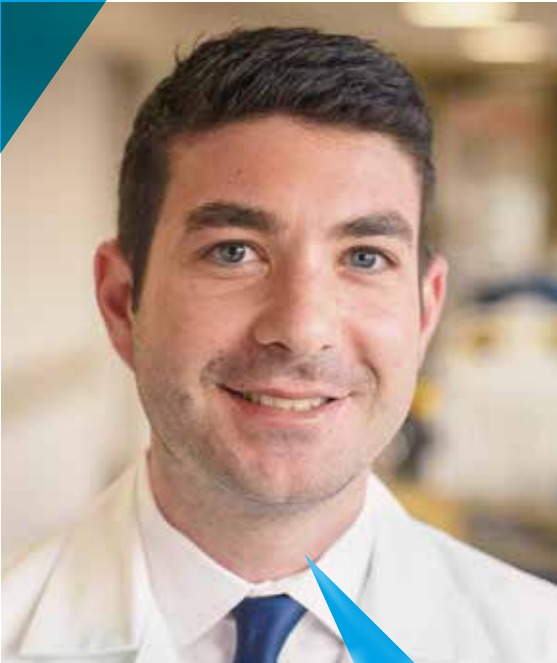
The Categorical Residency is a three-year program dedicated to producing the finest clinicians and future leaders in Internal Medicine.

The practice of clinical excellence, while utilizing a scientific thought process, is the central theme of our categorical curriculum. An evidence-based approach is emphasized both in the inpatient and the outpatient settings.

Through research projects, mentorship and extra-curricular activities related to two elective tracks, Medical Education, and Health Care Leadership, participants in the Categorical Residency have numerous opportunities to pursue interests directly related to their specific career plans. The program challenges each resident with progressively increasing responsibility in a setting characterized by close faculty mentoring.

As a PGY1

Each PGY1 spends several rotations on the inpatient wards at The Mount Sinai Hospital. The inpatient services encompass patients with gastrointestinal, cardiac, pulmonary, and oncologic diseases, as well as patients with HIV and advanced liver disease. Thus, in addition to learning general medicine, each inpatient rotation has specialized themes that present more intensive learning opportunities.



“Passion for teaching and mentoring the next generation of physicians is palpable at Mount Sinai. The opportunity to bedside round with and to learn from master clinicians is truly inspiring.”

— Sean Kotkin, MD, Class of 2016 & PGY6 (Cardiology)

PGY1s spend one block in the MICU at The Mount Sinai Hospital where they care for the most critically ill patients under the supervision of an attending physician. They also spend one block in the Emergency Department where they work one-on-one with an attending physician in both the walk-in area and the main area of the ED. Many of the patients seen during this time are referred back to the PGY1s' own clinic for continuity of care, allowing the trainee to build a practice rapidly. Each PGY1 also rotates through the Elmhurst Hospital on the inpatient General Medicine Service.

All PGY1s have six or seven, two-week blocks of outpatient medicine based in the continuity of care practice in the Center for Advanced Medicine at The Mount Sinai Hospital. In addition, all PGY1s are

assigned one block of elective time and four weeks of vacation. The rotations are designed to provide exposure to a remarkably diverse patient population.

A typical PGY1 schedule is as follows:	
PGY1	BLOCKS
Ward Blocks	5-6
Outpatient	3-3.5
Night Med	1-1.5
MICU	1
ER	1
Elective	1
Vacation	1

As a PGY2

The PGY2 year represents a major transition for the house officer. During ward blocks, the PGY2 serves as team leader taking more responsibility for patient care, in a supportive setting. They rotate through the Medical Intensive Care Unit, the Coronary Care Unit, the inpatient floors of The Mount Sinai Hospital and do inpatient time at Elmhurst and the Bronx VA.



Trainees also have two elective blocks, six to seven two-week outpatient blocks and four weeks of vacation. One of the outpatient blocks is spent going on home visits as part of the popular and rewarding Mount Sinai Visiting Doctors, the nation's largest academic home visit program.

A typical PGY2 schedule is as follows:	
PGY2	BLOCKS
Ward Blocks	4-4.5
Outpatient	3-3.5
MICU or CCU	2
Elective	2
Night Medicine	1
Vacation	1

As a PGY3

The PGY3 year is intended to further develop leadership skills and extend the resident's knowledge base, complete research projects, and focus on future career transitions. Residents spend one or two rotations on the inpatient wards at The Mount Sinai Hospital. In addition, they have a block each in the Coronary Care Unit, as the Medical Consult Resident and as the Medical Admitting Resident. They spend time at the Elmhurst Hospital Center as senior resident supervisors. They have six to seven, two-week outpatient care rotations, three elective rotations and four weeks of vacation.

A typical PGY3 schedule is as follows:	
PGY3	BLOCKS
Ward Blocks	2-3
Elective	3
Outpatient	3-3.5
CCU	1
Medical Consult	1
Senior Medical Resident	1-1.5
Vacation	1

CATEGORICAL RESIDENCY – HEALTH CARE LEADERSHIP TRACK

The Health Care Leadership Track is designed for residents interested in becoming leaders in inpatient medicine as critical care attendings, hospitalists, cardiologists, ID/HIV attendings, geriatricians, or other subspecialists.

Due to increasing clinical distinctions and financial pressures, hospitals prefer physician leaders who have both clinical expertise and skills in improving hospital systems and processes. In response to these demands, many internists are now focusing their careers on inpatient activities.

This is one of the few programs in the country that offers Internal Medicine residents the opportunity to gain the skills and experience in:

- Quality Improvement and Patient Safety
- Hospital Leadership
- The Business of Medicine
- Hospital Efficiency and Utilization Management.

The curriculum is integrated into the elective blocks of the second and third year of the Internal Medicine Residency Program and consists of a mix of didactics, clinical experiences, and direct involvement in hospital processes. All residents develop and complete a longitudinal, mentored hospital leadership research project.

Applicants interested in the Health Care Leadership Track should apply to the Categorical Residency program. Once enrolled at Mount Sinai, residents are encouraged to speak with **Vinh Tung-Nguyen, MD**, Director of the Health Care Leadership Track, about entering this program. Interested applicants should make note of their interest on the application, so appropriate interviews can be arranged.

CATEGORICAL RESIDENCY - MEDICAL EDUCATION TRACK

The Medical Education Track for the residency program began in the 2015-2016 academic year for residents interested in careers in medical education. Housestaff are invited to apply for the track at the end of their intern year and work through a two-year curriculum covering learning theory,

curriculum design and implementation, feedback and evaluation, and medical education scholarship. The core sessions of the track occur outside of elective time, preserving the ability of residents to pursue subspecialty clinical experiences. Residents in the Medical Education Track will help to create and implement a medical education project through the two years of the curriculum, with support and mentorship from the program. Projects developed through the track have included a professional skills curriculum for the residency, a pathophysiology-based monthly conference for the residents led by core faculty members, an enhanced ambulatory nutrition curriculum, and a peer-observation program aimed at improving teaching skills on resident-led rounds.

In addition to a focus on curricular design, the track will develop residents' skills as a medical educator, with additional teaching opportunities both at the residency and medical school level. Track residents are exposed to mentors and leaders in medical education throughout the Icahn School of Medicine



at Mount Sinai and the Mount Sinai Health System. The track is led by **David C. Thomas, MD, MHPE** and **Andrew Coyle, MD**.

CATEGORICAL RESIDENCY – GLOBAL HEALTH ELECTIVE

Partnering in research worldwide, Mount Sinai offers a Global Health elective. Our three most popular sites where we send trainees to are Cameroon, Bangladesh, and Kenya although other training areas are available.

The program gives Mount Sinai medicine residents the resources to pursue global health work during their PGY3 year. Residents who are interested an opportunity in Global Health should speak with **Salvatore Cilmi, MD**, Internal Medicine Residency Program Director, at least six months in advance of their senior year.

PRELIMINARY RESIDENCY

Our Preliminary Residency Program offers a variety of inpatient and outpatient experiences in general medicine and specialty services at The Mount Sinai Hospital, and Elmhurst Hospital Center.

The preliminary residency provides a strong foundation in Internal Medicine that graduates can draw upon in their subsequent specialty training. Most of our preliminary residents complete their post-graduate training in the following areas: Anesthesiology, Dermatology, Neurology, Ophthalmology, Radiation Oncology, and Radiology.

A typical Prelim schedule is as follows:	
PRELIM	BLOCKS
Ward Blocks	4.5
Elective	3.5
Night Med	2
ER	1
MICU	1
Vacation	1

Those applicants interested in the Preliminary Residency Program should indicate such on their application, and use the appropriate NRMP number.

PRIMARY CARE RESIDENCY

With the changes in the health care system as a result of federal reform, primary care physicians are on the front lines to provide compassionate, patient-centered, high-quality, cost-effective care. With complex treatment delivered more frequently in outpatient settings, increased specialization within medical fields, and the changing landscape of health care, the fulfillment of this mission requires a new generation of physicians dedicated solely to primary care. As such, Mount Sinai's Internal Medicine Primary Care Residency Program's goal is to create physicians who are:

- Well-rounded and effective clinicians, capable of providing high-quality, patient-centered, evidence-based clinical care in both inpatient and outpatient settings;
- Educators of both patients and fellow professionals;
- Advocates for patients and populations for improved health care;
- Leaders in all areas of primary care from the community to national level;
- Researchers, examining primary care clinical research, medical education and health systems/policy.

One of the distinct advantages of our Primary Care Residency Program is the variety of locations and practices at which our residents are able to train. While all residents maintain a practice at Mount Sinai's Internal Medicine Associates, which is hospital-based and the largest primary care provider in the East Harlem community, Primary Care residents have the opportunity to develop other practices. One such practice may be at a community health center or in a subspecialty clinic such as geriatrics or HIV. Others include the Visiting Doctors Program and Health Care For the Homeless.

As a PGY1

The intern year focuses on developing core basic skills in primary care. The clinical rotations center on providing continuity of care at our ambulatory care sites along with specialty clinics that focus on geriatrics, visiting doctors, homeless medicine and HIV care. The curriculum introduces residents to topics such as health policy, advocacy, scholarship and integrative medicine.



“It is the people that make our program at Mount Sinai so special. I have never met more intelligent, hardworking and dedicated residents.”
— Anna Plitt, MD, PGY5 (Cardiology)

PGY1s complete six additional weeks of ambulatory primary care, complementing the 10-week program required of all Internal Medicine residents. This year, PGY1s begin to identify a mentor and an associated research project based upon mutual interests.

As a PGY2

In the PGY2 year, residents hone their primary care skills by rotating through other specialty care clinics in addition to their general practice. The curriculum further delves into health policy, advocacy and quality improvement.

PGY2s have eight additional weeks of ambulatory primary care, complementing the 10-week program required of all Internal Medicine residents. Early in the year, residents select their research mentor and begin work on their major research project.

As a PGY3

In the PGY3 year, residents begin to take on leadership roles in the outpatient setting. The curriculum focuses on medical education, teaching and leadership.

PGY3 residents have 12 additional weeks of ambulatory primary care complementing the 10-week program required of all Internal Medicine residents. During their extra outpatient blocks, Primary Care residents have the opportunity to repeat any of our specialty clinics and have protected time to complete their major research project. Residents also have expanded teaching responsibilities at this time. PGY3s ultimately present their research projects both at the Division of General Internal Medicine Grand Rounds as well as at regional and national meetings of the Society of General Internal Medicine.

Applicants interested in the Primary Care Residency should make sure to use the appropriate NRMP number and to contact **Lauren Peccoralo, MD**, Director of the Primary Care Residency Program Track, or **Jennifer Weintraub, MD** Assistant Director of the Primary Care Residency Program Track, with any questions.

RESEARCH RESIDENCY

At Mount Sinai, we have researchers who are engaged in cutting-edge, scientific discovery that are changing the face of medicine today and tomorrow. The residents in the Department of Medicine who participate in the fast-track Research Residency Program can take advantage of the myriad of opportunities to work with these researchers while completing their medical training.

Our comprehensive, flexible and integrated program is designed for physicians who are committed to a basic or translational research-based academic career. Faculty guidance is provided immediately upon entry into the program and continued throughout. We are committed to training and nurturing physician-scientists by providing them with all the necessary tools for launching successful careers in academic medicine.

To complement their formal education, developing academic physician-scientists need postgraduate training, both in the clinic and the laboratory.

The result is a personally tailored, integrated training program that takes advantage of the strong clinical tradition in the Department of Medicine and the strength of the basic science programs in this department and throughout the Icahn School of Medicine at Mount Sinai. Residents are encouraged to continue their training in one of Mount Sinai's premier fellowship programs, but are given flexibility to apply to other fellowships if desired.

Candidates with exceptionally strong basic science research credentials, or graduates of MD/PhD and MD/MPH programs, are encouraged to apply to this program. Note that the Research Residency has a separate NRMP number from the Categorical Residency Program in Internal Medicine. Please contact **Emily J. Gallagher, MD, PhD**, Director of the Research Residency Program, with any questions.

INTERNAL MEDICINE/MEDICAL GENETICS RESIDENCY

The Departments of Medicine and Genetics and Genomic Sciences offer an innovative five-year residency program, approved by the American Board of Internal Medicine and the American Board of Medical Genetics, that integrates traditional Internal Medicine training with comprehensive training in medical genetics and genomics.

The combined track is designed for two distinct categories of candidates:

- Those interested in becoming clinical leaders in medical genetics and genomics who want to translate the rapid advances in this field into real-life therapies for patients with complex genetic disorders, or
- MD/PhD students who wish to develop translational or clinical research programs in fields affected by the rapid pace of genetic innovation and discovery.

Following completion of this program, candidates will be board-eligible for both Internal Medicine and Medical Genetics. Note that the Internal Medicine/ Medical Genetics Combined Residency has a separate NRMP number. Please contact **Salvatore Cilmi, MD**, or **George Diaz, MD**, Co-Directors of the Med-Genetics Program with any questions.

Where are they now? Class of 2018

CATEGORICAL GRADUATES

Evan Blank	Cardiology	Emory University
Konstantin Brodetskiy	Rheumatology	NYU
Maya Dimitrova	Hematology/Oncology	NYU
Christopher Franz	Pulmonary/Critical Care	UPMC
Jason Glass	Gastroenterology	UT-Southwestern
Michael Hadley	Cardiology – Academic Track	Icahn SOM at Mount Sinai
Lindsay Haines	Palliative Care	UPenn
David Kasper	Cardiology	Northwell Health
Matthew Katz	Chief Resident	Icahn SOM at Mount Sinai
Andrew Kim	Hospitalist	UT-San Antonio
Guido Lancman	Masters in Clinical Research	University College London
Amanda Leiter	Endocrinology	Icahn SOM at Mount Sinai
Michael Li	Gastroenterology	Brigham and Women's
Asha Mahajan	Cardiology	NYU
Ruben Mylvaganam	Pulmonary/Critical Care	Northwestern
Isha Ranadive	Cardiology – Clinical Track	Icahn SOM at Mount Sinai
Rajeev Samtani	Cardiology – Cardiac Imaging	Icahn SOM at Mount Sinai
Monica Schwartzman	Rheumatology	Hospital for Special Surgery
Kelsey Sokol	Hematology/Oncology	Thomas Jefferson University
Rose Yu	Chief Resident	Icahn SOM at Mount Sinai

MEDICAL EDUCATION TRACK

Sheena Bhalla	Hematology/Oncology	Icahn SOM at Mount Sinai
Oren Cohen	Chief Resident	Icahn SOM at Mount Sinai
Daniel DeMizio	Rheumatology	Columbia University
Sanchit Gupta	Gastroenterology	Brigham and Women's
Heidi Guzman	Endocrinology	Icahn SOM at Mount Sinai
Pritha Subramanyam	Cardiology	Weill Cornell
Alexander Vogel	Chief Resident	Icahn SOM at Mount Sinai
Adam Winters	Gastroenterology	UCLA

HOSPITAL LEADERSHIP TRACK

Meera Bhardwaj	Gastroenterology	Montefiore
Alaina Kessler	Hospitalist	The Mount Sinai Hospital
Ioannis Konstantinidis	Pulmonary/Critical Care	UMPC
Alexis Sharpe	Pulmonary/Critical Care	NYU
Hersh Shroff	Gastroenterology	Northwestern
Brittney Zimmerman	Hematology/Oncology	Icahn SOM at Mount Sinai

PRIMARY CARE TRACK

Rui Jiang	Preventive Medicine Residency	Icahn SOM at Mount Sinai
Melinda Katz	Internal Medicine	NYU – Bellevue
Tiffany Kenison	National Clinical Scholars Program	UCLA
Kyla Lara	Cardiology	Mayo Clinic
Keerti Murari	Endocrinology	Yale University
Angela Wong	Palliative Care	Icahn SOM at Mount Sinai

RESEARCH TRACK

Kemar Brown	Cardiology	Mass. General Hospital
Gennaro Giustino	Cardiology – Academic Track	Icahn SOM at Mount Sinai
Katherine Kim	Gastroenterology	Cedars Sinai
Alana Nguyen	Hematology/Oncology	Columbia University

PRELIMINARY INTERNS

Arielle Bokhour	Neurology	Icahn SOM at Mount Sinai
Ahuva Cices	Dermatopharmacology	Icahn SOM at Mount Sinai
Leah Croll	Neurology	NYU
Peter Goff	Radiation Oncology	University of Washington
Amy Huang	Dermatology Fellowship	SUNY Downstate
Helaina Lehrer	Neurology	Icahn SOM at Mount Sinai
Eitan Novogrodsky	Radiology	Montefiore
Emily Schorr	Neurology	Icahn SOM at Mount Sinai

CHIEF RESIDENTS

Colin Feuille	Gastroenterology	UCSF
Rachel Hillburg	Nephrology	UPenn
Jennifer Reese	Working on MPH	
Douglas Tremblay	Hematology/Oncology	Icahn SOM at Mount Sinai

Our Residents



The residents of the Mount Sinai Internal Medicine Residency Program are truly what make our program shine. Our trainees come from all over, representing many of the best medical schools throughout the United States and the world. Prior to residency, many already are leaders in biotechnology, translational research, genomics, primary care and public health.

The Internal Medicine Residency Program at Mount Sinai is designed to foster a team approach to patient care and learning. An essential component of that is creating an environment of friendship, camaraderie and well-being among residents and between residents and faculty.

Our newest intern class, for example, has distinguished themselves in many impressive ways:

- An MD from Stanford, with a PhD from the Massachusetts Institute of Technology in Medical Engineering, who has pursued projects on glycoantigen-specific CAR-T cell development and allogeneic immunotherapy for renal cell and bladder carcinoma;
- An MD/PhD from the Icahn School of Medicine at Mount Sinai who worked with Miriam Merad, MD, PhD, on the detailed study of tissue-related macrophages and their regulatory networks, leading to two first-author publications in *Cell* and a review article in *Nature Reviews Immunology*;
- An MD from the Royal College of Surgeons in Ireland who spent nine months in Uganda studying global emergency care, served as the President of the RCSI Biological Society (the oldest student medical society in Europe), and is an accomplished opera singer who has performed at Carnegie Hall;
- An MD from NYU who has worked for an NGO in Ghana and supported her medical education by working as a home health aide for four years, giving her unique insights into the needs of patients with chronic medical conditions;
- An MD from Rutgers-Robert Wood Johnson Medical School who was the founder and president of the Physicians for Human Rights chapter at his school and served as the student director for the Homeless and Indigent Population Health Outreach Project, Rutgers' largest community service organization;

- An MD from Yale whose research focuses on gender discrepancies in outcomes after ST-elevation myocardial infarction, using a database representing 29 countries and six different global regions..

Four residents are chosen annually to stay an additional year as chief residents. On a rotational basis, two of the chiefs are always present at The Mount Sinai Hospital, one at the Bronx VA Medical Center, and one at Elmhurst Hospital. These chief residents work closely with the chair and the vice chairs of the Department of Medicine and provide leadership throughout the residency training program. They are the liaison between the day-to-day workings of the house officers, the administration of the department, and the various hospitals. They have significant teaching responsibilities and are expected to be future leaders in medicine.



RESIDENT LIFE

While the demands of residency can be intense at times, residents are always pleasantly surprised to discover that life does not need to stop during their training. Throughout the year there are numerous social activities for housestaff, as well as their spouses, family and friends. These include attending New York Yankees games, Knicks games, karaoke and bowling nights, “Switch” Parties at the end of each block and the Annual Housestaff Follies.

Housestaff Council: The Department of Medicine Housestaff Council is a peer-elected body composed of house officers that serve as advocates for the residents. The council meets on a monthly basis to discuss resident-related issues regarding work environment, education and morale. The Housestaff Council collaborates with the program director, the administration and the chief residents on numerous projects throughout the year. In addition, the Housestaff Council assists and organizes social events including happy hours and orientation events for incoming residents. The Department of Medicine Housestaff Council sends representatives to the interdepartmental housestaff council to discuss hospital-wide concerns.

Housing: Mount Sinai owns several apartment buildings in the vicinity of the hospital, which are used for professional housing. Household size is a factor in determining housing assignments. Accommodations include furnished bedrooms in shared suites in the Residence Hall, as well as studios and one- and two-bedroom apartments. All are located in proximity to the hospital.



Incoming residents are eligible to apply for Mount Sinai housing. Housing offers are based on a lottery system in which applications are divided into three categories: incoming families, incoming couples and incoming singles. Each applicant will receive a housing offer based on their randomly assigned lottery number and top 10 choices.

Living in New York City: As one of the most influential and iconic cities in the world, New York offers nearly anything that you can possibly imagine. Whether you are interested in the post-modern collections at the Museum of Modern Art, the newest Broadway hit, the latest fashion trend or the independent film industry, New York boasts an array of culture every night. And for the adventuresome foodie or indie rocker, the city bursts with a new crop of restaurants and musical acts on nearly a weekly basis. Each neighborhood offers a different flavor and feel and if you grow tired of Manhattan, the outer boroughs can provide a year’s worth of activities. Mount Sinai’s Recreation Office provides discounts and other special offers to residents.

Benefits: Mount Sinai provides health coverage for house officers through Mount Sinai - United Healthcare, and we make available choices of alternative health coverage through several other HMOs. Cost sharing is available if you desire family coverage. Additional benefits offered at Mount Sinai include:

- Basic dental coverage, a prescription drug plan, and a vision plan at no cost to the house officer;
- Enhanced dental plans and family coverage available with a cost-sharing deductible;
- Short- and long-term disability, workers’ compensation, life insurance, and accidental death and dismemberment insurance for our house officers;
- Dependent care and tax-sheltered annuity plans;
- Malpractice insurance is covered for all residents.

SALARIES BY YEAR	
PGY1	\$63,481
PGY2	\$66,922
PGY3	\$70,518

Vacations: In recognition of the heavy clinical demands on residents, vacations are considered an essential component of the schedule. Residents receive four weeks of vacation per year. While every effort is made to provide vacations that accommodate individual needs and preferences, time for vacation is scheduled based on the clinical needs of the department.

Travel Stipends: The department also supports resident travel to clinical and research meetings for the presentation of papers and research results carried out in conjunction with faculty. Stipend includes domestic coach air travel, meeting registration and per diem expenses.

HOW TO APPLY

All applications are accepted only through ERAS and the Department of Medicine offers all of its Internal Medicine residency positions through the NRMP.

POSITION	NRMP #
Categorical Three-Year Program . . .	1490140C0
Preliminary One-Year Program. . . .	1490140P0
Research Residency Program	1490140C1
Internal Medicine/ Medical Genetics Combined Residency Program	1490766C0
Primary Care Residency Program	1490140C2

The Icahn School of Medicine at Mount Sinai sponsors other Internal Medicine programs that are primarily based at hospitals other than The Mount Sinai Hospital. These programs should be applied to directly. You may apply to more than one program sponsored by the Icahn School of Medicine and this will not prejudice consideration of your application. The review of your application and the scheduling of interviews requires, at the minimum, your ERAS application, transcript, and Dean’s letter. Additionally, we require a letter of recommendation from your Department of Medicine and letters from two faculty members. Please include a personal statement and curriculum vitae, in addition to the above, all through ERAS.

MANDATORY DRUG TESTING

Consistent with Mount Sinai’s commitment to a safe and drug-free environment for our patients and staff, all new employees, including housestaff, are required to pass a drug-screening test prior to beginning employment. Accommodation will be made for those taking prescription drugs.

APPLICATION CHECKLIST

- All applications through ERAS
- Transcripts
- Dean’s letter
- Letters of Recommendation (2)
- Department of Medicine Letter of Recommendation
- Personal statement
- Curriculum Vitae
- USMLE scores

CONTACT INFORMATION:

If you have any questions regarding the application or interview process, please do not hesitate to contact us.
Email: **residency@mssm.edu**
Tel: **212-241-6609**
Address:
Internal Medicine Residency Program
One Gustave L. Levy Place
Box 1118, New York, NY 10029
You may also email the Program Director or Chief Residents with questions or more information.

Salvatore Cilmi, MD
Director, Internal Medicine Residency Program
salvatore.cilmi@mssm.edu
Chief Residents:
Oren Cohen, MD
oren.cohen@mountsinai.org
Matthew Katz, MD
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