Current Residents

PGY-5 Chief Residents

Marta Hoes, MD, JD

Marta is a Texan at heart who grew up all over the US. She received a Presidential Scholarship to Texas Tech University (where her parents met in a science lab 30 years before). She knew she wanted to go to medical school, but took a meandering path, studying German, art, and political science, and discovering an interest in integrating different disciplines along the way. She also discovered a love for the law, and became the first graduate of Texas Tech’s combined MD/JD program, with thoughts of advocacy and medical policymaking. She completed a concentration in health law, tutored criminal law (with focus on insanity defenses and competency to stand trial), and presented on topics in forensic psychiatry and bioterrorism. Throughout medical school, she developed her interest in working with underserved children and adolescents through rotations in child abuse, rural child psychiatry, bioethics, and juvenile forensic psychiatry.

Marta was unable to decide between pediatrics and child psychiatry, and was thrilled to learn about triple board programs (not long before ERAS opened). She was beyond excited to match at Sinai and make the move from rural West Texas to Manhattan. Marta has had the pleasure of working in health care systems in Germany, Oman, the Mexico/Texas border, South Africa, and Kenya, and of advocating for children’s health to legislators in Austin and Albany. After Triple Board, she will complete a fellowship in Law and Psychiatry at Yale, and hopes to continue her work with underserved children in both the family court and juvenile justice systems. Outside of work, you can find Marta at one of New York’s many world-class art museums, taking obnoxious pictures of her food, or playing tennis.

Why Triple Board? Knowing I wanted to work with children, I decided to get as much exposure as possible to pediatric patients all across the spectrum of physical and mental health. I was interested in all of the places where pediatrics and child psychiatry overlap – child abuse and trauma, development, and advocacy in particular – and knew this type of training would give me exactly what I needed to prepare for a career in these areas. Given my previous training, I saw the fast pace of the program and need for adaptability as welcome challenges.

Advice for Applicants: Triple Board is a commitment, but a great opportunity to learn not only the core specialties, but also flexibility, leadership, and systems of care. The TB community is small and very welcoming – we mean it when we say to reach out with any questions! Try to get a sense of the culture of TB in general and of the different programs as you make this tough decision, and trust your gut through the process.

Amanda Kimberg, MD

I grew up in West Point, Virginia, a tiny coastal town, and then attended college at Duke University in Durham, North Carolina. During college I pursued interests in global health and education inequality. I spent my summers travelling to Tanzania where I volunteered at Amani Center for Street Children and participated in community-based research about substance use in this community. I also co-founded Student U, a non-profit in Durham, North Carolina to support and empower first-generation college-bound students. After college I travelled to the Mississippi Delta to teach high school chemistry through Teach for America. After teaching for four years, I found my way back to medicine and returned to Duke University School of Medicine where I participated in the Primary Care Leadership Track, a program that emphasizes longitudinal outpatient clerkships and community engagement. Given my interest in the intersection between health and education and psychosocial determinants of health, the Triple Board program felt like the right fit and New York felt like the right place.
Why Triple Board? As a teacher, I was confronted by the ways that both mental and physical health impacted my students in the classroom and I wanted to be able to fully understand these dynamics. Ultimately I want to be both a primary care pediatrician who is able to understand and treat psychiatric conditions and an outpatient child psychiatrist who understands the role of medical illness in the development and functioning of the child.

Advice for Applicants: Don’t be afraid to ask questions of everyone you meet along the interview trail. Find out who you identify with and whose careers you hope to emulate and then consider all the possible paths forward. Triple board residents go on to so many different careers and for each of those careers, there are countless paths to get there.

PGY-4

Shama Milon, MD

Originally from Dhaka, Bangladesh, Shama made multiple stops around the world before finally making her way to her favorite city, New York. She attended Duke University and University of Cincinnati College of Medicine. In medical school, her team won the MedPlus Advantage Global Health Challenge and she was nominated to the Gold Humanism Honor Society. One of her primary professional interests is in global health, taking her from researching incidence of maternal and child mortality in rural Bangladesh, working with Somali refugees in Cairo, Egypt, participating in a health exchange in Cuba, and traveling to Ecuador as a part of a team to research and bolster a community health workers program. Through these experiences, she began to form an appreciation for the social determinants of health and the interplay between psychological stress and physical illness.

Why Triple Board? Triple Board is a unique opportunity to understand and study illness from a variety of perspectives: the physical, psychological, and systemic. I'm interested in understanding trauma and resilience and how we can equip children with tools to succeed and overcome early childhood trauma. Fundamental to this is not only the psychological aspects of wellbeing but also understanding normal growth, development, and co-morbid illnesses.

Advice for Applicants: As everyone else will tell you, think about what knowledge you want to gain and which skills you want to refine during residency. Think about why you will benefit from the combined residency program rather than categorical Pediatrics or Psychiatry. Most importantly, have fun during the interview season. There are so many interesting and unique individuals I met during my triple board interviews who opened up my mind to all the possibilities within this field of medicine.

Sasha Taylor, MD

Sasha attended Skidmore College in Saratoga Springs NY where he pursued the clichéd pre-med topics of music and psychology. After college he briefly pursued a career as a professional trumpet player followed by spending a year in France teaching English before deciding to pursue a career in medicine. While completing his post-bacc and medical school application, he worked in psychiatric research at Boston Children's Hospital, primarily focusing on prevalence of and contributing factors to mental health disorder in children with different kinds of congenital heart disease. Other research included exploring the prevalence of mental health disorder in children with cardiac devices (i.e. pacemakers and ICDs), creating online resources both for children with urological conditions requiring self-catheterization and children with vascular anomalies, and looking at the effect of different therapeutic modalities for depression in children with IBD. He then attended the University of Vermont medical school where his yellowish hue and the fact he is a human contributed to his nomination to the Gold Humanism Society by his classmates, before being accepted to the Mount Sinai Triple Board program.
Why Triple Board? I was trying to decide between prioritizing triple board programs vs psychiatry programs with a likely fast track into child psychiatry and it wasn't until I did a month of triple board elective my 4th year that I realized a triple board program was the best choice for me. Areas of mental health that I'm most interested in include the mental health of children with chronic medical conditions, and the underlying biology of psychiatric disorder (especially as it is affected by medical conditions), and both of these interests appeared to benefit from a more robust exposure to pediatric medicine in conjunction with psychiatric training. Additionally, I felt my interests in abnormal childhood attachment and development, exploring preventative models of mental health, and interest in helping meet mental health needs through pediatric primary care all seemed to benefit from increased pediatric outpatient exposure, and having 4-5 years of weekly outpatient clinic is invaluable in this respect. Quite simply, I felt and still feel that a triple board residency was the best choice in allowing me to be the best practitioner I could possibly be in the area of pediatric mental health.

Advice for Applicants: I would echo the advice of others and say that while you don’t need to know exactly what you want to do with this combined training as a career, it is important to think about what this training offers you that you can’t get from doing categorical pediatrics or psychiatry and to be able to speak about those benefits because you will be asked about this on your interviews. I am more than happy to talk to anyone who is potentially interested in these programs, just to talk about areas of interest and how this may or may not be the best fit!

PGY-3

Brittany McCoy, MD

After spending the first decade of her life bouncing around the US while her father served in the Army, Brittany’s family finally settled in the small, rural town in southern Indiana that she calls home. As an undergraduate at Indiana University in Bloomington, she majored in Psychology. Her experiences interning at children’s psychiatric facilities in the region and working on research projects with a developmental psychopathology lab in IU’s psychology department convinced her early on that she wanted to pursue a career in child psychiatry. Brittany graduated with Highest Honors from IU and received the psychology department’s Excellence in Research Award for her work looking at relationships between parental severe mental illness, adverse pregnancy outcomes, and offspring ADHD and Autism Spectrum Disorder. Brittany also first discovered her passion for global health at IU, where she served on the leadership team of the university’s chapter of Global Brigades, working on public health projects in Honduras and Ghana. As a medical student at the Indiana University School of Medicine in Indianapolis, she continued to seek out opportunities to learn more about health disparities both in Indiana and internationally. She helped lead the Global Health Student Interest Group, spent a summer learning about healthcare in El Salvador, and subsequently co-founded IUSM’s alternative spring break program in the same country. In search of a way to combine her interests in global health, pediatrics, and psychiatry, Brittany took a year-long break from medical school in 2016 to serve as the Pediatric Global Health Research Scholar with AMPATH in Kenya, where she worked on projects aimed at improving health outcomes for HIV-infected adolescents in western Kenya with a focus on mental health and HIV-related stigma. Because of her work during medical school, Brittany was awarded the school’s Lynda J. Means Award for service to the underserved, the Global Citizen Award, and the Lorraine E. and Raymond A. Gaffney Scholarship Award for commitment to community service. She was nominated by her peers to be inducted into the Gold Humanism Honor Society and belongs to the Alpha Omega Alpha Honor Medical Society. Currently, Brittany serves on the Executive Board of Directors for a nonprofit, development organization that operates in Central America, CoCoDA. She hopes to continue to weave her interest in global mental health into her Triple Board training and is excited to explore all that Mount Sinai and NYC has to offer!

Why Triple Board? I knew going into med school that I wanted to be a child psychiatrist and with a strong suspicion that I’d want to pursue Triple Board training – an option that I only knew about so early because IU has a program. For me, Triple Board training just made sense. It seemed like the best way to set myself up for success in working with children in resource-limited settings. I’ve also always found the interplay between mental illness and other disease processes
incredibly interesting and wanted to be able to care for children in the most holistic way possible. Triple Board training offers a unique skillset that can allow you to do just that!

**Advice for Applicants:** Think about why you want to pursue Triple Board rather than categorical training and have a good reason for it. That reason isn’t “for” anyone else and doesn’t have to be “good enough” for anyone else but you! But, understanding why you want to go through a combined/condensed residency will help you during the interview and ranking process to more easily tease out which program is your best fit and will be able to give you what you want out of your training. In the end, go with your gut!

![Jason Sarte, MD](image)

Born and raised in central NJ, Jason comes to Mount Sinai by way of Harvard—where he studied philosophy and molecular biology as an undergrad—and Brown, where he attended medical school. In college, he was involved in adolescent health education, serving as a health teacher for freshmen in Boston public high schools with the organization Peer Health Exchange. He was also very involved in choral singing as a member of the Harvard-Radcliffe Collegium Musicum. Before med school, Jason worked for two years as a patient care coordinator at Mount Sinai’s World Trade Center Health program, an occupational health clinic that serves first responders at Ground Zero who deal with chronic health issues due to post-9/11 environmental exposures. Jason entered medical school with an interest in psychiatry because of the fascinating mind-body, spiritual, and philosophical questions that psychiatrists get to grapple with on a daily basis. In his work with Boston Healthcare for the Homeless and the World Trade Center Health program, he had also been able to see firsthand the devastating effects that mental illness can have on individuals and communities—whether in the form of substance use, thought, mood, or trauma-related disorders—and began to recognize his desire to be an advocate for the vulnerable and often stigmatized patients suffering with these illnesses. Throughout medical school, Jason continued to explore psychiatry through clinical rotations and in his work with Dr. Katherine Sharkey on a project investigating sleep, mood, and neurobehavioral performance in the perinatal period, the latter of which brought him to the 2016 SLEEP conference for an oral presentation and poster session. He was also honored to be inducted into the Gold Humanism Society as well as to receive the Isaac Ray Award in Psychiatry. His interest in Triple Board began to develop during his clinical rotations, when he discovered a love for general pediatrics as well as a particular interest in working at the nexus of primary care and child & adolescent psychiatry. He was thrilled to match at Mount Sinai, his absolute top choice, and looks forward to continuing to explore the complex relationship between pediatric physical and mental health and how they interact with one another to inform development and disease progression.

**Why Triple Board?** I entered medical school with a strong interest in psychiatry but did not start contemplating Triple Board until my third year pediatrics rotation. I was lucky to have gone to a medical school with a Triple Board program, so I was able to get a good sense of what the training would entail. Essentially, I realized that I loved both pediatrics and child psychiatry, but more specifically I wanted to be trained broadly in the whole health of the child. I have a difficult time separating physical and mental health in my mind, and this seemed to be very much in tune with the philosophy of the Triple Board programs. I am confident that this program will prepare me very well to work at the intersection of general peds and child psychiatry and will give me a very well-rounded and holistic approach to treating my future patients.

**Advice for Applicants:** I definitely think it was helpful to have gone to a med school with a Triple Board program because I went into the application process with a good understanding of the training. I would advise applicants to do an away rotation at a Triple Board program if your med school does not have one. This will also give you an opportunity to talk to current residents about their reasons for choosing TB, and to witness for yourself what it looks and feels like to have such diverse training. I would also say that it is totally okay to be undecided about triple board versus categorical peds or psych going into the application process. Interviews will be extremely helpful in sorting out what your priorities are and where you would fit best.
Melissa Kelley, MD

Melissa was born and raised in Las Vegas, Nevada and moved up to Reno, Nevada for all her schooling. She began her habit of studying things in threes during undergrad at the University of Nevada, Reno by majoring in Neuroscience, English Literature, and International Affairs. She took a year off after graduating and moved to Queenstown, New Zealand where she used a working holiday visa to become a waitress/bartender at a local restaurant. During medical school at the University of Nevada School of Medicine, Melissa completed research on the role of prenatal care status on postpartum depression development as well as served as the Women's Clinic Manager and Addiction and Behavior Change Group Manager at the Student Outreach Clinic, a student-run clinic providing free care to the uninsured and underinsured. She also developed a strong interest in global health as fostered by her time living in Prague, Tokyo, and Queenstown. She completed a global health scholarly concentration, worked at a clinic in Nicaragua for two weeks, and spent one month in Tokyo, Japan for a medical rotation. Melissa initially entered medical school interested in OB/GYN but found herself drawn to both pediatrics and psychiatry during clinical rotations. After being introduced to Triple Board by a mentor, she became fascinated with the field. Her decision to pursue Triple Board was motivated by her interest in working with medically complex children with psychiatric conditions, being an advocate for mental health, and providing comprehensive care to underserved populations. Her interests outside of medicine include travel, crafting/sewing, video games, board games, Zumba, and trying not to fall during aerial silks.

Why Triple Board? I spent a lot of my third year of medical school very confused as to what to do for residency. I developed a passion for general pediatrics but felt uncomfortable not addressing psychiatric conditions, a major source of harm and distress in this population. I found it difficult to separate the fields in my mind and wanted to be trained to address all aspects of my pediatric patient’s care and educate on the interplay of mental and psychical health. Thankfully I had a mentor who suggested Triple Board and I felt relieved to find a program that fit my interests. Completing an away rotation at Brown cemented my decision to pursue the field.

Advice for Applicants: Like many others have said, think about what you can gain from a Triple Board program that you otherwise would not obtain from general pediatrics or CAP. Post-pediatric Portal Program is another avenue to look into if you are more interested in general pediatrics. You don’t have to have a set plan for your career, but you should think about which avenues interest you and how TB can help you reach your goals. If you hail from a school without a program like I did, I strongly advise you complete an away rotation in Triple Board to get a better sense of the program and meet residents. When interviewing, focus on finding a program that seems to be the best fit for you!

Michelle Urman, MD

Michelle was born and raised in Brooklyn, NY by hilarious Russian-Ukrainian immigrant parents – frolicking between boroughs partially to attend school, but mainly to have all the snacks. She attended NYU for college where she studied psychology and mathematics. After college, she took two years off to work as a clinical research coordinator for the Mount Sinai Brain Injury Research Center and was involved in research studying the late effects of traumatic brain injury and interventions to improve targets such as emotion regulation and fatigue. She then moved to upstate NY to attend Albany Medical College, where she was shocked at the low price she could get a one-bedroom for. There she co-founded the Capital District Asylum Collaborative (a student run asylum clinic providing pro-bono medical and psychological evaluations in support of asylum seekers escaping persecution and extreme violence). She additionally co-led the LGBTQ People in Medicine group, which hosted events and trainings to promote awareness and competency in queer and trans health care related topics. Throughout her time in medical school, she
was also committed to service learning and worked as a family advocate and health education advocate for refugee/immigrant and Muslim communities in Albany. Her work with youth and families with limited access to quality care and exposure to complex trauma re-affirmed her desire to attain the training needed to address both physical and mental wellbeing. She graduated from Albany Medical College as a member of the Gold Humanism Honor Society.

She is excited to be back to her home city for residency and in her free time, she can be found out trying any new food she can, exploring cool hiking spots around the city, painting, reading, dancing, and snuggling on the couch with her girlfriend watching Bob’s Burgers over dinner.

Why Triple Board? Working with kids always brought out the very best part of me and I wanted to be able to be a pediatric provider that had expertise in both physical and mental health for kids, ranging from infants to adolescents. In the end, doing anything else other than triple board felt like denying a part of my future doctor self that wanted to grow and flourish!

Advice for Applicants: Don’t worry if you have not done away rotations or fully know where you belong, or that you found out about Triple Board late. Just talk to as many people as you can adjacent to triple board and try to look deep and see what it is you can’t live without as you picture yourself as the doctor you want to be. Things will come together and you will become who you were meant to become!

PGY-1

Alexander Hish, MD

I’m originally from Plainfield, IL, where I had a cozy upbringing between corn fields and Wall-Marts in the suburbs of Chicago. I majored in Biology and minored in Philosophy and Computer Science at Duke University in Durham, NC, and loved the balmy weather and southern barbecue so much that I stayed for medical school. I consider myself to have an active imagination, much in the same way you would describe a 5 year old; I grew up loving fantasy novels and video games, and this appreciation for the abstract carried with me into a deep involvement in the medical humanities and burnout/wellness research at Duke Med. I spend most of my free time engaging in all things film, poetry, psychology, comedy, and music. For me, Sinai was attractive not only for its Triple Board program and the people that make it up, but also for its location in the heart of NYC and the many artistic and cultural experiences on offer.

Why Triple Board? Early in medical school, I found that psychiatry seemed to be the one specialty that preserved the patient-provider relationship in its traditional form, with the doctor taking on the role of confidant and earnest listener—an image that inspired me to undertake medical training from the beginning. However, during my clinical year, I most connected with the patients and families in pediatrics. This was unexpected for me, but attending to children involved cultivating patience, calm, and humor—similar to psychiatry. There was something very special in the act of sitting at the bedside of sick children, becoming an enduring symbol and role model in the life and mind of a young person. In my later years of medical school, I often felt torn between these two fields. I spent a lot of time working in both pediatrics and psychiatry settings, including some that combined both fields as a few of my mentors were Triple Board-trained. In this work, I increasingly found that among my adolescent and adult psychiatry patients, often their stories of illness were rooted in patterns of behavior ingrained in the person’s developmental history, or born of trauma experienced in their early years. The most important lesson that I learned from this: as in all of medicine, the best mental health care is practiced preventatively. By the end of these experiences, I was firm in my determination to become a pediatrician and child psychiatrist. I wanted to be an advocate and innovator in the area of preventative health care, expanding these models of care to encompass more fully the social and emotional development of children, and to identify struggling children early on and target them for mental health intervention. I wanted to be able to cross the lines separating primary care pediatrics from psychiatric and psychological care, helping these providers to communicate and learn from each other. Beyond these reasons, I felt that I still had a lot to learn from both pediatrics and psychiatry, and didn’t want to miss the opportunity to continue my personal growth by working in both fields. By
completing residency training in a Triple Board program, I hoped to best prepare myself to guide children to live holistically healthy and fulfilling lives.

**Advice for Applicants:** If you think you’re interested in Triple Board, it’s important to gain a lot of child psychiatry experience, and to try to have at least one experience working with a Triple Board provider. However, don’t forget to seek out experiences in categorical pediatrics and general psychiatry settings as well. You want to make sure you’re making the right decision for yourself, and I believe the best way to do this is to actually experience what it feels like to be a pediatrician/psychiatrist/child psychiatrist. During these rotations, take lots of notes not only about what you learned, but also about thoughts you had and how you felt. I would also recommend writing out personal statements for categorical pediatrics, categorical child psychiatry, and Triple Board separately—this exercise may help you to crystallize your thoughts/feelings about each program and make a decision if you’re on the fence.

**Divya Hoon, MD**

Divya was born at our very own Mount Sinai Hospital, and grew up just across the river in New Jersey. She attended Bowdoin College in Maine where she majored in biochemistry and minored in Spanish. There, she participated in various clubs and activities that provided support to survivors of sexual assault, children identified as being at-risk, and the community at large. She then moved to New York and spent two years pursuing cancer drug development research at Mount Sinai. She went on to attend medical school at Rutgers Robert Wood Johnson where she spent four years researching pediatric off-label drug use in children, completing a Distinction in Research and publishing in Pediatrics. In her free time, she enjoys spending time with her dog (or any dog) and sampling the limitless restaurant options in NYC.

**Why Triple Board?** I loved both my pediatrics and psychiatry rotations in medical school, but too often, I would leave the hospital thinking about patients who had medical issues with psychiatric comorbidities. I found that too often the lack of social supports for such patients impeded their ability to receive care. And the fact that many providers operated in silos didn’t help. When it came time to apply to residency, my mentors asked me with which side of the treatment team I most identified – pediatrics or psychiatry? The answer was simple: I see myself on both sides. I found that for so many patients, the problems that affect their quality of life the most will always be the marriage of both medicine and psychiatry. I also believe that in order for these patients to have positive outcomes, having providers that are adept at navigating these issues together as opposed to approaching them as distinct entities is integral to their care.

**Advice for Applicants:** Not knowing what you want to pursue is okay and normal! Talk to people who have triple boarded – the triple board community is full of kind, engaging, open people, and think about how your career path would differ with triple boarding vs pursuing pediatrics or psychiatry alone. Whatever your career goals are, you can find a way to get there!