THE BEST OF BOTH WORLDS
Cross-campus training enriches the residency experience

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THE BEST OF BOTH WORLDS

Cross-Campus Training Enriches the Residency Experience

Residents who train in emergency medicine, otolaryngology/head and neck surgery, and child psychiatry at NewYork-Presbyterian Hospital benefit from collaborations between the Hospital’s two main campuses that are providing a unique opportunity for a more varied and comprehensive educational experience.

Capitalizing on the various strengths of each of their emergency medicine departments, Neal E. Flomenbaum, MD, Physician-in-Chief of Emergency Medicine at NewYork-Presbyterian/Weill Cornell, and James F. Giglio, MD, Physician-in-Chief, Emergency Medicine at NewYork-Presbyterian/Columbia collaborated on the establishment of the first merged residency program following the creation of NewYork-Presbyterian Hospital.

“We knew that combining the resources of both campuses—with their very different patient populations in size, socioeconomics, pathologies, and acuity levels, as well as very high case volumes and access to a Level 1 trauma center, pediatric emergency rooms, and emergency preparedness initiatives—would offer graduating students an emergency medicine residency on a dimension that had never been equaled anywhere before,” says Dr. Flomenbaum.

To lead the program, they recruited Wallace A. Carter, MD, then at Bellevue Hospital, who, notes Dr. Flomenbaum, “was the top residency director in the country.”

“Residents get the chance to work with some incredibly gifted and talented physicians and students within the backdrop of two strong medical schools,” says Dr. Carter, who joined the program in 2001 and serves as residency director. “You put that all together and it’s a pretty heady place to be.”

“The first class of 10 residents was selected with leadership potential as the single most important characteristic we considered,” says Dr. Giglio. “We knew that we were changing a culture and that our residents would be ambassadors for our specialty. We are now graduating a group of doctors who are very well trained because of the tremendous educational opportunities afforded to them at these two great medical centers. And they are better suited for career success than the majority of doctors graduating from even the finest residency programs throughout the country.”

Keeping pace with the growing field of ENT, NewYork-Presbyterian Hospital continues to expand its program under Lammy Garth Close, MD, who heads the Department of Otolaryngology/Head and Neck Surgery at NewYork-Presbyterian/Columbia, and Michael G. Stewart, MD, who

(Clockwise, from left) Dr. Joanna Bird and Dr. Amitava Sen, second-year residents in the child psychiatry training program, are accompanied by Dr. Rebecca Rendelman, “in psychiatry, more so than any other field,” says Dr. Sen, “having a good foundation working with a wide variety of cultures and socioeconomic backgrounds is really important.”

Dr. Raffaele Millizia, a second-year emergency medicine resident, and Dr. Jenice Forde-Baker, in her third year, speak with Dr. James Giglio (far left) and Dr. Wallace Carter. Both agree that a bi-campus program factored into their decision to train at NewYork-Presbyterian.

Dr. Michael Stewart discusses a case with Dr. Jerry Lin, chief resident, who says, “I like the fact that the program incorporates two major hospitals in New York, providing exposure to a diversity of patients, as well as a variety of approaches to patient care.”
leads the Department of Otorhinolaryngology at NewYork-Presbyterian/Weill Cornell.

The 12 residents in the combined program undergo broad-based training with one of the largest full-time clinical faculty in the world. "An average size otolaryngology program has about 10 full-time members," says Dr. Stewart. "With the cross-campus program, we have more than twice that number."

Otolaryngology, adds Dr. Stewart, is unique in that "we have so many close neighbors: ophthalmology and the sinuses; neurosurgery and the inner ear; pulmonary in terms of the larynx and the trachea; gastroenterology with reflux; and plastic surgery for reconstructions. We collaborate with probably more specialties than any other in terms of diseases that cross anatomical borders, and our residents benefit greatly from this level of interaction."

Dr. Close adds that the combined program has increased its emphasis on endoscopic and minimally invasive procedures, including skull base surgery; expanded its pediatric services with the addition of a cochlear implant program; developed a speech and swallowing center; and enhanced its voice and professional voice program. As a measure of the program's success, it has just received approval from the Accreditation Council for Graduate Medical Education for an additional resident, bringing the total number to four.

"Both Departments of Psychiatry have a long and distinguished history and offer different perspectives and strengths," says Rebecca Rendleman, MD, associate residency director of the two-year combined child psychiatry program. Twelve residents in each year rotate through Morgan Stanley Children's Hospital, Payne Whitney Manhattan and Payne Whitney Westchester.

"Combining forces has created a training opportunity that's unparalleled for our residents," says Elisabeth B. Guthrie, MD, the residency training director for child psychiatry. "At Columbia, we provide outpatient services in a subspecialty model; at the Weill Cornell campus, the outpatient program is organized around a generalist model. These provide wonderful lessons at different levels of training. It's not just how to provide care. It's also about finding different ways of organizing systems of care."

Research was also an important component in the development of the cross-campus child psychiatry program. Every fellow in his or her second year devotes a quarter of clinical time to research or scholarly activity.

"In graduating from this residency, I feel I have a wealth of people that I can refer to and call on in the years to come," says second-year resident Joanna Bird, MD. "That's invaluable."
As he steps down as Chief of Pediatrics, Dr. John Driscoll will remain on the faculty with plans to take a sabbatical and study ethics and humanism in medicine. He will also work to establish an endowment for faculty and research to help foster the growth of physician-scientists.

"A lot of what has changed in my 40 years in pediatrics is because of work done in the laboratory that was brought to the bedside," he says. "You need young people who are committed to understanding diseases like diabetes, obesity, autism, and mental health disorders in children, which are skyrocketing. To keep medicine moving beyond the past advances, we need physician-scientists. The opportunities are extraordinary, and I think medicine is in very good hands."

Retirement will also allow more time to spend with his wife, Yvonne, their six children and their families, seen here vacationing at Martha's Vineyard.

Babies Hospital was the only place that could save him. He made a full recovery, and his grandmother made sure he remembered why.

"Most Sundays we would drive to Washington Heights to visit my grandmother," he recalls. "Without fail, she would take me to the corner of her bedroom window and point to the flagpole over Babies Hospital and say, 'Remember, that's the hospital that saved your life.' It was part of the routine."

Dr. Driscoll attended Hamilton College and Wake Forest University School of Medicine, and trained as an intern at Children's Hospital in Pittsburgh where he met his wife, Yvonne, also a pediatrician. When he returned to Babies as a pediatric resident in 1967, he got a warm welcome. "The hospital was run by Elizabeth Callahan," he says. "And when I walked in to pick up my garb, she said, 'Welcome home, doctor,' and gave me my ID card from when I'd been a patient in 1939."

Barely out of fellowship, Dr. Driscoll became head of the neonatal intensive care unit. "It was a great time to be in neonatology because we were on the cusp of some amazing changes," he says. Dr. Driscoll helped care for the first hydriptic baby who survived erythroblastosis. He also worked with Drs. Charles Stolar and Jen Wung to improve the care for children with respiratory failure, e.g., with diaphragmatic hernias, and helped develop the first NICU follow-up program. "We lived through an era when we lost 80 percent of certain patients to now where 90 percent survive."

Dr. Driscoll and his colleagues also started the first neonatal ethics committee, included parents in treatment discussions, and developed enlightened approaches for helping families who lost a baby. "Sometimes it was inappropriate to treat a baby, and the ethics committee made sure parents or nurses could bring their cases to the committee. This was the beginning of ethics in pediatrics. It was a marvelous time with major progress."

Dr. Driscoll is also a respected educator. Dorothy Levine, MD, trained under him from 1980 through 1983 and remembers him as a rare teacher. "He has the magic of being a wonderful physician and academician, as well as a supportive friend and leader," says Dr. Levine.

Throughout his career, Dr. Driscoll has maintained a singular focus on his patients—a perspective he has passed on to each new class of residents. "You are entering, in my mind, the greatest of all professions," he tells them. "Try and think of another job in which two young parents trust you with the life of their most precious possession, their infant. There can be no greater responsibility or greater compliment."
July 2007

Dear Alumni,

We’re pleased to present to you the premier issue of Forum—a quarterly publication produced specifically for alumni of NewYork-Presbyterian Hospital. In this issue, we highlight three of our cross-campus residency programs—emergency medicine, which is ready to graduate its first class of 10 residents; the otolaryngology program, which is now among the largest in the country; and the child psychiatry residency, which provides training in a variety of inpatient and outpatient settings. In addition, the issue profiles the esteemed Chief of Pediatrics—Dr. John Driscoll—who is stepping down after 40 years with Morgan Stanley Children’s Hospital, and is himself an alumnus.

In future issues, Forum will highlight news about you and your fellow alumni. We encourage you to submit information about your professional and personal lives so that you can bring your colleagues up-to-date on where you are now.

We are very excited about the establishment of an Alumni Association dedicated to the Hospital’s former residents and fellows. Already, many of you have enrolled, but if you have not yet done so, we urge you to get in touch with us. We look forward to hearing from you.

Warmest regards,

Herbert Pardee, MD
President and CEO
NewYork-Presbyterian Hospital

Richard S. Liebowitz, MD, MHS
Vice President, Medical Affairs
NewYork-Presbyterian Hospital

STAYING CONNECTED

Share your news with fellow alum. Future issues of Forum will contain Alumni News and Notes featuring news items, personal and professional achievements, career highlights, awards and recognitions, and brief profiles.

In addition, the NewYork-Presbyterian Hospital alumni website—www.nyp.org/alumni—is now on-line. We invite you to visit the site and register with us to reconnect with your colleagues and access a range of professional resources and member benefits available to you, including CME activities at reduced rates, E-newsletters, and access to clinical trials.

Please send correspondence to:
Richard S. Liebowitz, MD, MHS
Vice President, Medical Affairs
NewYork-Presbyterian Hospital
161 Fort Washington Avenue, New York, NY 10032
p: (212) 305-2494 f: (212) 305-4131
rsi9002@nyp.org

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Continuing Medical Education (CME) activities are provided through Columbia University College of Physicians and Surgeons and Weill Cornell Medical College. Both academic medical centers are accredited by the Accreditation Council for Continuing Medical Education (ACCME) to authorize and issue CME credit for programs that are developed by either institution. Upcoming programs include:

**JULY 2007**

**Annual Update and Intensive Review of Internal Medicine**

Sponsors: Columbia University Medical Center and Beth Israel Deaconess Medical Center

**Date:** July 15 - 21, 2007  
**Time:** 7 am - 6 pm  
**Location:** The Roosevelt Hotel  
New York, NY

CME Credits: 58

For information/registration, call the Center for Continuing Education at Columbia University College of Physicians and Surgeons, (212) 305-3334 or go to www.cumc.columbia.edu/dept/cme.

**A Comprehensive Review of Movement Disorders for the Clinical Practitioner**

Sponsor: Columbia University College of Physicians and Surgeons

**Date:** July 30 - August 2, 2007  
**Location:** St. Regis Hotel, Aspen, CO

CME Credits: 21.5

For information/registration, call the Center for Continuing Education at Columbia University College of Physicians and Surgeons, (212) 305-3334, or go to www.cumc.columbia.edu/dept/cme.

**SEPTEMBER 2007**

**Renal Biopsy in Medical Diseases of the Kidneys 30th Annual Postgraduate Medicine Course**

Sponsor: Columbia University College of Physicians and Surgeons

**Date:** September 26 - 29, 2007  
**Time:** 8 am - 6 pm  
**Location:** The New York Academy of Medicine, New York, NY

CME Credits: 30.0 (27 credits for the plenary presentations and 3 credits for the optional laboratory)

For information/registration, call the Center for Continuing Education at Columbia University College of Physicians and Surgeons, (212) 305-3334 or go to www.cumc.columbia.edu/dept/cme.

**Paroxysmal Disorders: Differential Diagnosis of Seizures**

Sponsor: NewYork-Presbyterian Hospital and Weill Cornell Medical College Department of Neurology and Neuroscience/Comprehensive Epilepsy Center

**Date:** September 29, 2007  
**Time:** 8 am - 1 pm  
**Location:** Weill Cornell Medical College, Uris Auditorium, New York, NY

CME Credits: 4.5

Contact Catherine Soto, at (212) 746-2625; e-mail: cass2007@med.cornell.edu. There is no registration fee.

**NOVEMBER 2007**

**Brain Attack and Cerebrovascular Disease - Update 2007**

Sponsor: Columbia University College of Physicians and Surgeons

**Date:** November 9, 2007  
**Time:** 8 am - 5 pm  
**Location:** Grand Hyatt Hotel at Grand Central Station, New York, NY

CME Credits: 8

Register online at www.nypneuro.org.

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**NewYork-Presbyterian**

The University Hospital of Columbia and Cornell

Office of Medical Affairs  
NewYork-Presbyterian Hospital  
525 East 68th Street  
New York, NY 10065  
www.nyp.org/alumni