

# GUIDE TO FELLOWSHIP APPLICATIONS

April 2013

**DEPARTMENT OF MEDICINE  
NEW YORK-PRESBYTERIAN HOSPITAL  
WEILL CORNELL MEDICAL COLLEGE**

*This guide is available on the Cornell Medicine website and is updated regularly.  
<http://www.cornellmedicine.com/education/index.html>*



Weill Cornell Medical College

**NewYork-Presbyterian**  
Weill Cornell Medical Center

# Table of Contents

Chairman's Introduction	3
Message from the Program Director	5
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Advanced Heart Failure and Transplant Cardiology	6
Cardiovascular Disease	8
Clinical Cardiac Electrophysiology	11
Interventional Cardiology	13
Endocrinology, Diabetes, and Metabolism	15
Gastroenterology and Hepatology	18
Geriatric Medicine	21
Health Services Research	23
Hematology and Medical Oncology	26
Infectious Diseases	28
Nephrology	30
Pulmonary Disease and Critical Care Medicine	32
Rheumatology	34
-----	
<b>APPENDIX</b>	
<b>A Practical Guide to the Fellowship Process</b>	<b>37</b>
1. Overview	38
2. Planning Your Application	39
3. Where Should I Apply?	41
4. The ERAS Application and EFDO	42
5. Advising	43
6. Letters of Recommendation	44
7. Preparing a CV	45
8. Personal Statement	46
9. Interviewing	50

## **CHAIRMAN'S INTRODUCTION**

### **My Personal Perspectives on Fellowship Application**

Our Residents in recent years have had extraordinary success in placement into Fellowship programs of their choice. This is, in part, a tribute to a strong culture of highly personalized faculty support for our Residents' career development. It also reflects an unusual level of unselfish time commitment by many of our junior and senior faculty to guiding and championing our Residents in their Fellowship applications. In turn, our excellent Residents become great ambassadors for the Weill Cornell-NYP Internal Medicine Residency Program, creating a self-amplifying pipeline to the most competitive programs.

However, the process of Fellowship application requires a reciprocal time and effort commitment on the part of our Residents to making themselves highly competitive. Our Residents must assume a proactive role in the process of their own applications. Most importantly, this can't begin only in the final, often frantic few weeks of applications. It must begin at the start of Internship. It requires our Interns and Residents to individually overcome the natural tendency to inertia concerning the application process during the first couple of years. Some specific suggestions:

- From the beginning, you should *proactively cultivate* faculty champions for your application. Above and beyond your assigned Attendings on various rotations, get to know some faculty members in depth. Make appointments with them to get career guidance; share with them your career aspirations; ask them about their own career development; and, especially for those with whom you relate well, follow-up with more meetings. Cultivating strong letters of support for your applications is a time-consuming but very gratifying process. Only by getting to know key faculty members in depth can you expect them to be your personal champions in securing a competitive Fellowship position.
- Your Personal Statements do matter in applications. Give yourself enough time to make them thoughtful and interesting. Don't just state what *you* are looking for from a Fellowship program: indicate how you will *contribute* to the program and, eventually, to that specialty field. (I am happy to help with drafts, if you wish: I will pull no punches in critiquing them in very specific and hopefully constructive ways. However, please give me ample lead time.)
- If you are undecided about which subspecialty you wish to choose, you are certainly not alone. Let us (including myself) help you by talking you through the options and guiding you to certain faculty members or former trainees who can provide you with more personalized advice. In many cases we can suggest exciting ways to combine what may seem to you to be very different specialties.

Even for excellent Residents in great programs like ours, the Fellowship application process can provoke considerable anxiety. The number of Fellowship positions in any given program is much smaller than in Residency programs, so matching to competitive positions is inevitably more

unpredictable than what you experienced as medical students applying for Internship.

I strongly recommend to you that you not procrastinate in cultivating the strongest possible application for yourself. Time passes quickly during Residency and inertia is a powerful force. I urge you to take advantage of a great network of guidance at Weill Cornell-NYP, especially for those who seek it out proactively.

This brochure, which is updated at least once a year, provides practical information for Fellowship application in the various subspecialties. I am personally committed to ensuring that each of our Residents who seeks Fellowship training secures a position in the strongest, and personally most rewarding, program possible. I would greatly enjoy meeting with you, as frequently as you wish, to help in any way I can.

**Andrew I. Schafer, M.D.**

The E. Hugh Luckey Distinguished Professor of Medicine  
Chair, Department of Medicine, Weill Cornell Medical College  
Physician-in-Chief, NewYork-Presbyterian Hospital/Weill Cornell

## Message from the Program Director

The Internal Medicine Residency Program is proud of its tradition of placing our residents in top tier subspecialty fellowship. The Department of Medicine, its faculty, and the program leadership are available to help you develop professionally and provide you important career advice during your residency. Please take advantage of the wealth of information you have at your disposal within the department.

My personal advice about this process is to spend time during your residency to make connections with faculty and topics within medicine that can inspire you for your career. When you are passionate about what you are doing, your success is nearly guaranteed. Put yourself into new experiences during residency to figure out what you really love and look for advisors and mentors who can be honest with you about your strengths and weaknesses in growing professionally.

The process to secure a Program Director letter is as follows:

1. Send your personal statement to both your faculty advisor and the program director.
2. Schedule a meeting with one of your faculty mentors within the discipline that you are applying to. The fellowship directors make themselves readily available to you for advice about programs.
3. Meet with your faculty advisor to discuss your plans. Provide them a copy of your CV and share with them what key events have led to your decision about this career. The more personalized you get, the stronger your letter will be.
4. Consider meeting with the program director if there are special considerations that are important to your application (e.g., if you are limited to one city due to a significant other or sick parent).

Look broadly at programs and seek which programs have the track record of success in the area you seek. In addition, work to understand how fellows are mentored and what opportunities and resources are available to fellows during the training period. Consider where graduates of the program end up for their careers.

We are delighted to support you through this process and are proud to help you achieve the great careers you seek. You are the legacy of the program.

### **Lia S. Logio, M.D.**

Director, Internal Medicine Residency Program  
Herbert J. and Ann Siegel Distinguished Professor of Medicine  
Department of Medicine, Weill Cornell Medical College

# **Advanced Heart Failure and Transplant Cardiology Fellowship Application Guide**

The Fellowship Program in the Maurice R. and Corinne P. Greenberg Division of Cardiology at Weill Cornell Medical College/New York-Presbyterian Hospital is a one year ACGME-accredited program that prepares highly qualified candidates for careers in Advanced Heart Failure and Transplant Cardiology. This fellowship will train fellows in the management of the advanced congestive heart failure patient population. This includes patients with: acute decompensated heart failure (left and right), destination or bridge to transplant mechanical assist devices, acute support devices, perioperative high risk conventional cardiac surgery, approved and investigational catheter or mini surgical valvular interventions; those needing evaluation for, and those who already underwent heart transplantation. An added strength of the program is in-depth training of the evaluation and management of pulmonary hypertension and exposure to patients with WHO Groups 1-5 PH. Cardiac Transplantation training portion occurs at NewYork Presbyterian Hospital-Columbia Medical Center. Highlights of this program include a strong collaboration with colleagues from cardiac imaging, catheterization lab (including structural heart disease program), electrophysiology, cardiothoracic surgery, cardiac anesthesia, rheumatology and oncology.

## **Instructions to Applicants**

Fellows must be enrolled or have completed a fellowship in cardiovascular disease. Fellows are accepted into the program after three years of cardiology training. An application for Advanced Heart Failure and Transplant Cardiology Fellowship is available online on the Division of Cardiology website at [www.cornellcardiology.org/fellowships](http://www.cornellcardiology.org/fellowships).

## **Application Timeline for Fellowship Training Beginning July 1, 2014**

**Application Deadline:** Applications are being considered February to May 2013

## **Application Requirements**

- Application form
- Curriculum vitae
- Statement of intent
- Two letters of recommendation

## **Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital**

The Greenberg Division of Cardiology at Weill Cornell offers an Advanced Heart Failure and Transplant Cardiology Fellowship accredited by ACGME. The heart failure service has a high volume of clinical activities related to all aspects of heart failure, mechanical circulatory support, pulmonary hypertension and cardiac transplantation. The fellowship consists of one year of intensive clinical training. The service comprises three attending heart failure specialists, assisted by nurse practitioners on the inpatient and outpatient service, and research support staff.

Fellows are trained in the inpatient and outpatient management of patients with advanced heart failure and pulmonary vascular disease. The one year fellowship will include nine months of inpatient service, of which three months is dedicated to transplant cardiology at NewYork Presbyterian Hospital-Columbia Medical Center. Experiences will include a wide spectrum of patients with advanced heart failure as well as the management of mechanical circulatory support devices, high risk cardiac surgery patients, complex congenital heart disease, and WHO Groups 1-5 pulmonary hypertension. The range of mechanical circulatory support available includes state of the art left ventricular, biventricular support as well as ECMO. Additional time is devoted to continuity clinic weekly. Fellows will also participate in organ procurement, endomyocardial biopsy training and interrogation of implantable defibrillators. A core curriculum in advanced heart failure,

pulmonary hypertension, and transplant cardiology is taught throughout the year by the full-time faculty. In addition, monthly Journal Club and Heart Failure Specialty Conferences are a regular part of the curriculum. This training program meets all the clinical requirements for Advanced Heart Failure and Transplant Cardiology board certification by the American Board of Internal Medicine.

### **General Advice**

Selection of fellows will be made on the basis of their clinical ability, aptitude, academic credentials, communication skills and personal qualities such as motivation and integrity. With regard to application for fellowship positions, letters of recommendation from the Program Director as well as other cardiology faculty carry significant weight. It is important for the program to understand the applicant's skills in clinical care, professional judgment, and academic potential. Prior research experience in heart failure, pulmonary hypertension and general cardiology are also considered in our application review process.

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## Cardiovascular Disease Fellowship Application Guide

The Fellowship Program in the Maurice R. and Corinne P. Greenberg Division of Cardiology at Weill Cornell Medical College/NewYork-Presbyterian Hospital is a three or four-year program that prepares highly qualified candidates for careers in investigative and clinical cardiology. Our program is one of approximately 170 programs accredited by the Accreditation Council of Graduate Medical Education (ACGME) and participates in the Match conducted by the National Residency Matching Program (NRMP). The Internal Medicine Subspecialty Match for 2013 is now held in December of the year prior to the start of fellowship.

After three years of training, candidates are eligible for board certification in cardiovascular disease, but would require at least one more year of training to subspecialize in Interventional Cardiology, Electrophysiology, Advanced Heart Failure and Transplant Cardiology or advanced imaging. Our fellows receive comprehensive experience in all major clinical and laboratory aspects of contemporary cardiology under the close supervision of full-time staff. In addition, all fellows are expected to participate in one or more areas of ongoing research during their training.

### **Instructions to Applicants**

Physicians who will have completed an ACGME-accredited internal medicine residency may apply to the NewYork-Presbyterian/Weill Cornell Cardiovascular Disease Fellowship Program. All application materials must be sent to the fellowship program via the Electronic Residency Application Service (ERAS). To register and submit your application, please visit the ERAS website at [www.aamc.org/services/eras/](http://www.aamc.org/services/eras/). Once all applications have been received and reviewed, applicants will be notified if an interview is granted. NewYork-Presbyterian/Weill Cornell is an equal opportunity employer and does not discriminate with regard to sex, color, creed, religion, sexual preference, or disability.

It is recommended that all fellows have a current New York State License and Registration and a current DEA number. Information and application for New York State License can be found at the New York State Education Department website: [www.nysed.gov](http://www.nysed.gov). All fellows are required to maintain appropriate immigration status at all times. NewYork-Presbyterian/Weill Cornell sponsors a variety of visas for foreign nationals, depending on the position, salary, and length of commitment. We do not sponsor H1-B visas. Once an applicant has made a firm commitment to NewYork-Presbyterian/Weill Cornell in regard to a fellowship, Human Resources will provide the forms that are needed to obtain the required information to access your potential for varying visas.

### **Instructions to Applicants**

#### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1413521202

#### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492141F0

#### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** Application Review from July 15, 2013-August 31, 2013.

**Interview Dates:** September 2013 – October 2013



## **Application Requirements**

Please submit the following documents via ERAS:

- Application
- CV
- Personal statement
- Medical school transcript
- Medical school Dean's letter and/or medical school performance evaluation
- Three current letters of recommendation
- USMLE or COMPLEX score report

## **Fellowship at Weill Cornell Medical Center/NewYork-Presbyterian Hospital**

The Cardiology Fellowship is based at the Weill Cornell Campus of NewYork-Presbyterian Hospital and includes clinical and research resources at our neighboring sister institution, Hospital for Special Surgery. Clinical and research opportunities at both of these institutions are an integral part of the program, which is designed to train physicians interested in developing academic and clinical careers in cardiology. The 4.5 acres surrounding the hospital contains one of the largest concentrations of biomedical research and care anywhere in the world, including the Rockefeller Institute and Memorial Sloan Kettering Cancer Center, both of which provide additional research opportunities. The program integrates a broad-based, in-depth clinical and research experience in order to deliver the highest-quality academic training to cardiology professionals. Clinical care is the focus of the first two years, while the third and fourth years involve a more intensive, mentored experience in a particular clinical subspecialty or in basic research. Every fellow is expected to be productive in research, and an additional year (or more) of training/research in a subspecialty area can be arranged, as indicated.

The clinical experience at NewYork-Presbyterian/Weill Cornell is unsurpassed and includes rotations in the cardiac intensive care unit and cardiac step-down units, the inpatient consultation service at NewYork-Presbyterian Hospital, and the Hospital for Special Surgery, the cardiac catheterization lab, electrophysiology lab, cardiac graphics, heart failure, echocardiography, and nuclear cardiology. Fellows spend one half-day per week in the outpatient clinic in adult cardiology. The fellows are trained and supervised clinically with one-on-one teaching by senior faculty. Didactic sessions include a full introductory curriculum, weekly curriculum throughout the year, Prevention and Management Conference, Imaging Conference (specific to echo, cardiac CT and MRI), Clinical Case Conferences, a monthly Journal Club, Cardiovascular Grand Rounds, and subspecialty conferences in catheterization and electrophysiology. Fellowship research projects generally tie in with ongoing research activities within the program. Each fellow's research experience is coordinated by a faculty mentor of his/her choosing. For fellows pursuing basic science or translational research, a master's degree in science is offered over a two-year period (these courses are scheduled into years two, three, or four). Fellows pursuing a project in clinical research are encouraged to pursue a certificate in clinical investigation. All fellows are expected to present the results of their research at regional and national meetings.

The clinical experience at the NewYork-Presbyterian/Weill Cornell is also extraordinary in its breadth and attending physician availability. The Department of Medicine has approximately 17,000 admissions per year of which more than 3,000 are admitted to the cardiology inpatient service. Approximately 2,500 cardiology patients are seen in an ambulatory setting each year. A broad range of cardiologic problems is assessed at NewYork-Presbyterian, including complex congenital heart disease, advanced heart failure, and pulmonary hypertension. The invasive cardiac laboratories perform all diagnostic catheterizations, percutaneous interventions (including ASD and PFO closures) and electrophysiological studies (including ablations of atrial and ventricular arrhythmias and device implantation). We are also actively enrolling patients in large clinical trials, including those evaluating new stents, percutaneous aortic valve replacement, mitral valve repair,

implantation of closure devices for paravalvular regurgitation, and renal artery denervation for resistant hypertension.

The Weill Cornell Cardiology Fellowship Program is dedicated to advancing knowledge in both basic and clinical research. The research program is strongly supported by multiple federal and non-federal grants. The research is performed on-site in recently renovated, state-of-the art laboratory facilities. The researchers cover most traditional and emerging areas of cardiovascular research, including atherosclerosis, vascular physiology, electrophysiology and arrhythmia, stem cells and cell therapy, cardiac development, stroke and thrombosis, heart failure, interventional devices, and health policy. Seventy percent of Weill Cornell cardiology faculty members participate in world-class basic science, translational or clinical research, and 30 percent are full-time clinical cardiologists involved in clinical investigation and/or teaching.

### **General Advice**

Selection of fellows from among eligible applicants will be made on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation and integrity.

If you are interested in an academic career, it is important to demonstrate some research experience in your application. Letters of recommendation are also very important. A letter from a renowned cardiologist who says that you are one of the top five people they have ever worked with will carry more weight than a similar letter from an instructor. At the same time, however, you should request letters from people who know you well and can attest to your strengths. Brief letters from famous people who spent very little time with you won't carry much weight.

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## **Clinical Cardiac Electrophysiology Fellowship Application Guide**

Over the past several years, there have been unprecedented advances in the diagnostic and therapeutic options available for patients with cardiac arrhythmias, including new ablation techniques and implantable devices with sophisticated capabilities. Fellowship programs in clinical cardiac electrophysiology (CCEP) offer fellows intensive training in the wide variety of arrhythmia management options. The Accreditation Council for Graduate Medical Education (ACGME) mandates one year of fellowship training to qualify for board certification in CCEP, but many fellows require longer to master the complex invasive techniques now available in electrophysiology.

### **Instructions to Applicants**

Fellows must be enrolled or have completed a fellowship in cardiovascular disease. Fellows are accepted into the program after three years of cardiology training. Alternatively, fellows may devote their third year of cardiology fellowship to dedicated EP training, which would be considered the first of two years in the CCEP Fellowship. An application for the CCEP Fellowship is available online on the Division of Cardiology website at [www.cornellcardiology.org/fellowships](http://www.cornellcardiology.org/fellowships).

### **Application Timeline for Fellowship Training Beginning July 1, 2014**

**Application Deadline:** Applications are considered on a rotating basis.

### **Application Requirements**

- Application form
- Curriculum vitae
- Personal statement
- Three letters of recommendation

### **Applications should be sent to:**

Jim Cheung, MD  
Division of Cardiology  
520 East 70th Street, Starr-4, Box 161  
New York, NY 10021

### **Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital**

The Greenberg Division of Cardiology at Weill Cornell offers a CCEP fellowship accredited by ACGME. The electrophysiology service has a high volume of clinical activities related to all aspects of arrhythmia evaluation and treatment. The service comprises six attending electrophysiologists who are assisted by nurse practitioners in the device clinic, nurse practitioners on the inpatient service, and research support staff. The fellowship consists of two years of intensive clinical training. Fellows undergo extensive training in mapping and ablation of complex arrhythmias, such as atrial fibrillation, atrial tachycardia, and ventricular tachycardia including epicardial ablation. They attain expertise in device and lead implantation and management, with emphasis on implantable defibrillators and cardiac resynchronization as well as lead extraction with laser energy. A core curriculum in electrophysiology is taught throughout the year by the full-time faculty every week. Sessions on intracardiac electrogram review, journal club and research are also conducted weekly. The laboratory has multiple research programs, and fellows are expected to participate in projects with the goal of presenting at national meetings and publishing in peer-reviewed journals. Current research projects include the investigation of the following: outcomes after atrial fibrillation ablation, utility of adenosine testing in pulmonary vein isolation and ablations of other arrhythmias, utility of intracardiac echocardiography in catheter ablation of ventricular tachycardia, and survival analysis of ICD leads.

### **General Advice**

Prospective fellows should understand that a successful career in clinical electrophysiology requires a blend of analytical skills, clinical judgment, and procedural expertise. Many procedures are complex and lengthy, and favorable outcomes depend on persistence as well as skill. Those considering a career in this field should be acquainted with the variety of interventions as well as the range of problems treated by electrophysiologists. Those best suited for a CCEP fellowship enjoy the deductive reasoning of electrogram analysis and also the challenges of invasive procedures. It is strongly recommended that the candidate spend time in the invasive laboratory and participate in procedures to gain a sense of the daily routine and demands required of the arrhythmia specialist. Also, prior research experience in cardiac arrhythmia management and general cardiology are also considered in our application review process.

With regard to application for fellowship positions, letters of recommendation from electrophysiologists will carry significant weight. It is important for the program to understand the applicant's skills in clinical care, professional judgment, manual dexterity, and academic potential.

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## **Interventional Cardiology Fellowship Application Guide**

The Maurice R. and Corinne P. Greenberg Division of Cardiology at Weill Cornell Medical College offers an advanced training fellowship in interventional cardiology that is accredited by the Accreditation Council for Graduate Medical Education (ACGME). The fellowship consists of one year devoted to intensive training in all aspects of interventional cardiology.

### **Instructions to Applicants**

Applicants must have completed at least three years of fellowship in cardiovascular disease in an ACGME-accredited program. Applicants will be invited for interviews after the completed applications are received. An application for the CCEP Fellowship is available online on the Division of Cardiology website at [www.cornellcardiology.org/fellowships](http://www.cornellcardiology.org/fellowships).

### **Application Timeline for Fellowship Training Beginning July 1, 2014**

**Application Deadline:** April 1, 2013

### **Application Requirements**

A completed application consists of:

- An application form
- A curriculum vitae
- A personal statement
- Three letters of recommendation

### **Applications should be sent to:**

Robert M. Minutello, MD  
Division of Cardiology  
520 East 70th Street, Starr-4, Box 161  
New York, NY 10021

### **Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital**

Interventional cardiology fellows will be trained in and perform percutaneous coronary interventions utilizing all currently available technologies, including drug eluting stents, rotational atherectomy, thrombectomy devices, distal protection devices, intravascular ultrasound, and fractional-flow reserve. The program places a heavy emphasis on a systematic, evidence-based approach to diagnostic and therapeutic coronary and endovascular procedures. All fellows will have the opportunity to be proficient at the end of training in diagnostic angiography, pericardiocentesis, hemodynamic evaluation of patients, and the use of a variety of closure devices, as well as experience in left ventricular assist devices including Impella. Each fellow will also have exposure to peripheral interventions, the treatment of patent foramen ovale and atrial septal defect, alcohol septal ablation, and therapeutic options for the transcatheter treatment of valvular heart disease including TAVR procedures. The program stresses development of fellows in all areas of interventional cardiology, as each fellow has ample time to develop expertise in pre-procedural as well as post-procedural management of the patient in both the inpatient and outpatient settings.

The cardiac catheterization laboratory at Weill Cornell currently comprises five full-time interventional cardiology faculty, and the laboratory performs nearly 6,000 total cases and 2,000 percutaneous coronary interventions yearly. Within the division exists a separate heart valve center dedicated to the management of patients with aortic and mitral valve disease. The cardiac catheterization service maintains a high volume of procedural and clinical practice, utilizing a team consisting of faculty attendings, a nurse practitioner service, clinical fellows, interventional cardiology fellows, and dedicated nurses, technologists, angioplasty specialists,

and research support staff.

The laboratory has active clinical research programs, and fellows are expected to participate in projects with the goal of presenting at national meetings and preparing their research for publication in peer-reviewed journals. Clinical research projects include both prospective (either single-center or multi-center) device and pharmacologic clinical studies and retrospective single-center studies from our own Weill Cornell cardiac catheterization laboratory database or multi-center database from the New York State Angioplasty Registry and the ACC-NCDR Registry. In addition to these areas of research, the laboratory participates in numerous multicenter clinical trials.

### **General Advice**

Our cath lab faculty considers research to be an integral part of a candidate's training, and therefore consider past research experience to be an important part of a candidate's resume. We recommend that candidates partake in some research endeavor during their general cardiology fellowship. We also recommend that candidates who apply should have had at least 10 months of training within the cath lab during their general cardiology fellowship.

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## **Endocrinology, Diabetes, and Metabolism Fellowship Application Guide**

Fellowship in the Division of Endocrinology, Diabetes and Metabolism is a two-year, ACGME accredited training program that provides unique, in-depth experience in the field of endocrinology. Endocrine fellows receive a wide range of didactic instruction and clinical training in the inpatient and ambulatory facilities of three premier medical institutions: NewYork-Presbyterian Hospital, Memorial Sloan-Kettering Cancer Center, and the Hospital for Special Surgery. The first year of fellowship is comprised of intensive clinical training, while the second year focuses on clinical, translational, or basic science research. An additional year of research training (non-ACGME) may be arranged on an individual basis.

### **NYPH/WCMC Endocrinology Application Process for Fellowship beginning July 1, 2014**

#### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1433521136

**Program Application Deadline:** Sunday, Sept 1, 2013, on or before 11:59 PM (Eastern Time)

<https://www.aamc.org/services/eras/>

#### **NYPH/WCMC Endocrinology Fellowship Applicant Interview Process**

**First 2 weeks of September 2013:** Application materials are reviewed by Program

**Last 2 weeks of September 2013:** Program contacts applicants to schedule on-campus Interview Days

**Wednesdays in October 2013:** Program holds Fellowship Interview Days (by invitation only)

#### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492143F0

**Match Day:** generally early December

<http://www.nrmp.org/fellow/>

Physicians who will have completed an ACGME-accredited internal medicine residency may apply to the NewYork-Presbyterian/Weill Cornell Endocrinology, Diabetes and Metabolism Fellowship Program. Fellowship applications must be submitted electronically through the American Association of Medical Colleges' Electronic Residency Application Service (ERAS). To register and submit your application, please visit the ERAS website at [www.aamc.org/services/eras/](http://www.aamc.org/services/eras/).

The NYPH/WCMC Endocrinology Fellowship Program will download and archive all ERAS application materials submitted before our **program application deadline of 11:59 PM (Eastern Time) on Sunday, Sept 1, 2013**. Please note that only materials available for download through ERAS on or before the program deadline will be reviewed by the Fellowship Selection Committee.

Applicants selected to interview on-campus will be notified during the last two weeks of September 2013. All on-campus interviews will be held on Wednesdays during October 2013. NewYork-Presbyterian/Weill Cornell is an equal opportunity employer and does not discriminate with regard to sex, color, creed, religion, sexual preference, or disability.

#### **NYPH WCMC Endocrinology Fellowship Application Requirements**

A complete application to our program includes the following documentation, submitted through ERAS:

- ERAS Common Application Form (CAF) with CV
- Three letters of recommendation (LORs)
  - One letter from the director of your residency program, and two letters from faculty or professional mentors
- Personal statement
- ECFMG status report (international medical graduates only)

- USMLE transcript
- *Optional* — Wallet-sized color photograph
- *Optional* — Medical student performance evaluation and medical school transcript

All applicants must be U.S. citizens or permanent residents at the time of application (on or before 09/1/2013.) The fellowship program does not sponsor any visas at this time.

Lastly, fellowship candidates will be expected to obtain a New York State Medical License and DEA certification by the program start date of July 1, 2014.

### **Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital**

**Rotations:** Fellows divide their time between NewYork-Presbyterian Hospital/Weill Cornell Medical College, Memorial Sloan-Kettering Cancer Center, and the Hospital for Special Surgery. The program's 12 rotations enable fellows to see inpatient consults, participate in outpatient clinics, and attend academic conferences at all three institutions. At NewYork-Presbyterian Hospital, fellows diagnose and treat patients with general endocrine and metabolic disorders and participate in a weekly Continuity Care Clinic. At the Hospital for Special Surgery, fellows gain experience in the diagnosis and treatment of metabolic bone diseases, and at Memorial Sloan-Kettering Cancer Center they receive unique training in thyroid malignancies and endocrine tumors. During the second year, fellows work directly with expert faculty in endocrine subspecialty clinics. Each clinical rotation requires fellows to be actively involved in all aspects of patient care, and often provides the opportunity for fellows to gain teaching skills while supervising residents and medical students on elective.

**Research:** During the second year of the program, at least 50% of the fellow's time is protected for participation in academic research. Based on individual interest and on-going studies, fellows may select faculty mentors from a wide range of disciplines at any of the three sponsoring institutions. Program faculty are currently conducting research in the areas of thyroid cancer, diabetes mellitus, obesity, and calcium and bone metabolism. Concurrent with second-year research, fellows may pursue a certificate or master's degree in clinical investigation from Weill Cornell's NIH-funded Clinical and Translational Science Center (CTSC). By the completion of their second year, fellows are expected to have prepared at least one study for presentation at a national conference or publication in a peer-reviewed journal. As appropriate, fellows may choose to continue their training with an optional third year of fellowship (non-ACGME) devoted to further research.

### **General Advice**

Think about your career goals (clinical, basic science, or translational research; private practice; etc.). Will the program's curriculum and resources adequately prepare you for this career? If you are interested in an academic career, you should prepare for additional years of research. Only two years of endocrinology fellowship training are required by the ACGME and ABIM, but many institutions offer an additional 12 months of fellowship dedicated to further research. Will additional research years be funded by the program? Does the program have a T32 training grant to support fellow research? Do fellows of this program routinely receive research grants? Can fellows obtain auxiliary training through the program or institution (for example, a master's degree in clinical investigation)?

When planning your application, at least one letter of recommendation should come from a faculty mentor who is an endocrinologist. If you have been involved in a research project, it would help to have your research mentor write a letter about you and your work. Check each program's specific requirements for letters of recommendation. Does the program require a letter from the Chair of Medicine, your Residency Program Director, etc.? Ask for these letters in advance to allow sufficient time for the letters to be written and posted to ERAS by the program's application deadline.



Be sure to list all of your publications, abstracts, or presentations in your application. If you are involved in research, include and describe any ongoing projects. If you are interested in a particular area of research and the program has a faculty member in that area, ask if you could meet him or her during your visit. Be prepared to discuss your past and present research endeavors with program faculty.

Prepare for your interview by reviewing the program or institution's website. This will help focus your questions pertaining to the program and your academic interests. Most programs will allow time for you to meet with current fellows. This meeting is often quite helpful in assessing how well the program fits your interests.

## **Contacts**

### **Primary Contact**

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# Gastroenterology and Hepatology Fellowship Application Guide

## Gastroenterology and Hepatology Fellowship Application Guide

Given the developments of recent years, gastroenterology is among the most exciting and dynamic subspecialties within medicine. The multitude of challenges and opportunities that are on the horizon are limitless, and the need for astute and motivated trainees with strong clinical or basic science research potential is growing. Over the past five years, GI fellowship training programs have increased their number of matched candidates from 276 in 2007 to 362 in 2011.

### Instructions to Applicants

Details on the match can be obtained from the NRMP's website at [www.nrmp.org](http://www.nrmp.org), and a listing of programs participating in the Match can be found on the Education and Training section of [www.gastro.org](http://www.gastro.org).

### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1443521171

### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492144F0 Gastroenterology/Clinical  
1492144F1 Gastroenterology/Clinical Investigator Research

### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** Accepted between July 1, 2013 and August 1, 2013

**Interview Dates:** August - September 2013

### Application Requirements

- Curriculum vitae
- Personal statement
- Three letters of recommendation (one of which must be from Program Director or Chief of Service)

### Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital

The Weill Cornell Fellowship in Gastroenterology and Hepatology is a three-year program located at the NewYork-Presbyterian Hospital/Weill Cornell Medical Center. The fellowship seeks to attract the best and brightest trainees who have an interest in pursuing a career in academic medicine. Our fellowship program offers a full range of conferences and extensive interaction with highly skilled gastrointestinal pathologists, interventional and diagnostic radiologists, and surgeons. In addition, our fellows have the opportunity to work with and teach an outstanding group of Weill Cornell medical students and house officers. At the present time, two fellows are accepted into the program annually.

The first year is largely consultative. Fellows maintain a weekly ambulatory patient practice from which they derive many of their outpatient procedures. Inpatient activities involve an active consult service, daily endoscopy, and a broad range of conferences. First-year fellows are on call an average of one weekend per month and one weeknight per week.

Six months of the second year of the fellowship is protected for participation in clinical or basic research, and a didactic program is available for training in clinical investigation, involving course work in epidemiology, clinical trial study design, biostatistics, outcomes assessment, and ethics of research. Major clinical programs and research efforts are based at our Center for the Study of Hepatitis C, Jill Roberts Center for Inflammatory

Bowel Disease, Jay Monahan Center for Gastrointestinal Health, Advanced Pancreatic/Biliary Endoscopy and the Center for Liver Diseases and Transplantation.

Fellows are expected to be involved in basic or clinical research. Opportunities for basic research exist at NewYork-Presbyterian Hospital/Weill Cornell Medical Center, The Rockefeller University, and Memorial Sloan-Kettering Cancer Center. Fellows who choose to participate in clinical research are expected to submit abstracts to local and national meetings, prepare original papers for submission to peer-reviewed journals, and develop clinical protocols under the tutelage of a faculty mentor. Third-year fellows continue the research projects developed and generated in their second year. They have an opportunity to pursue specific areas of interest in inflammatory bowel disease, hepatology, liver transplantation, advanced endoscopy and cancer screening and prevention.

**Rotations:** First-year fellows spend most of the year on the GI consult service at NewYork-Presbyterian/Weill Cornell Medical College. They spend one month at Memorial Sloan-Kettering Cancer Center, which is located directly across the street from NewYork-Presbyterian/Weill Cornell. They also have a one-month elective block. Second-year fellows spend two months on the liver transplantation service at NewYork-Presbyterian/Columbia University Medical Center. The program director of the transplant fellowship, Dr. Robert Brown, coordinates the fellowship rotation on the transplant service. Fellows are integrated into a call schedule while on this rotation to maximize their learning experience. The fellows also spend one month at the Jill Roberts Center for Inflammatory Bowel Disease, and have one to two months on the endoscopic ultrasound and pancreaticobiliary services. Third-year fellows have minimal programmatic requirements other than additional months of work on hepatology, inflammatory bowel disease, and nutrition. The bulk of the year can be tailored to the particular fellow's interests. This may include advanced endoscopic procedures, basic research in the laboratory, or the pursuit of advanced degrees in outcomes research.

**Research:** There are a number of ongoing research activities by both full-time and voluntary faculty. They include basic research into cancer chemoprevention under the direction of Dr. Andrew Dannenberg, hepatitis C under the direction of Dr. Charles Rice at the Center for the Study of Hepatitis C at The Rockefeller University. There are many opportunities to participate in clinical research in areas such as hepatology, inflammatory bowel disease, cancer screening, endoscopic ultrasound, biliary tract disease, the microbiota of the GI tract, novel endoscopic imaging techniques, etc. Furthermore, there are numerous multicenter clinical trials of novel therapies for Crohn's disease, ulcerative colitis, hepatitis C, and irritable bowel syndrome that are under active investigation. A center for esophageal diseases and motility will be opening later this year.

Any introduction to a fellowship in gastroenterology would be incomplete without a discussion of endoscopy. The Endoscopy Suite is a full-service unit that recently underwent a nearly \$2 million upgrade. All the equipment is high-definition with narrow-band imaging capabilities. There are rooms for conventional endoscopy, pediatric endoscopy, and advanced endoscopy. The Endoscopy Suite is an all-video endoscopy suite that is fully automated with an image management system, and has an automated record keeping system as well as emergency equipment. The Advanced Endoscopy Rooms have digital fluoroscopy for ERCP, both radial array and linear array endoscopic ultrasound. Additionally, ultrasound probes are available for through-the-scope usage. Fellows participate in the full spectrum of technologies available to them in the Endoscopy Suite. Opening in 2014 will be a specially equipped surgical suite for endoscopic surgery coordinated through the Center for Advanced Digestive Care. Fellows conduct daily endoscopy sessions with faculty for their inpatients and ambulatory patients. Over the course of training, fellows will generally perform more than 600 upper endoscopies, 300 colonoscopies, and a significant number of EUSs and ERCPs.

### **General Advice**

The faculty and program leadership are supportive of the Weill Cornell/NYPH applicants: consultation with them before preparing an application is strongly encouraged. Please take care that your letters of

recommendation are submitted before ERAS opens — which means that you need to have completed your CV and personal statement early enough to give to your letter-writers well in advance.

The greater New York City area has a multitude of programs, but we would encourage you, if your family situation allows it, to think broadly as well as locally. Our graduates have garnered advanced degrees and competitive fourth-year fellowship slots, have been appointed to faculty across the country, and have embarked upon successful clinical careers.

While clinical achievement is of the utmost importance, academic programs look to the research portfolio as an important measure of both the applicant's commitment to gastroenterology and future potential.

**Becoming involved in projects as a PGY1 helps set the stage for a completed endeavor at the time of application.**

We strive to ensure that all of our residents train at the best possible programs, and strive to help mentor them accordingly when determining which programs they will apply to and then what their rank order should be. To that end, both Dr. Brian Bosworth (Program Director) and Dr. Ira Jacobson (Division Chief) make themselves available to residents and *strongly encourage* personal meetings as the process unfolds – to review programs the resident is interested in, edit personal statements, and give advice on ranking.

#### **Contacts**

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Ming H. Su

Administrative Coordinator

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## Geriatrics Fellowship Application Guide

Geriatric fellowship programs are based in internal medicine and family medicine programs and last either one or two years in duration. (Applicants can have completed either residency.) The second year is generally devoted to research and is not ACGME-accredited. (J-1 visa holders are eligible for only a one-year program.) Some programs offer both one-year and two-year positions. All programs must offer acute care, outpatient care, long-term care, and home care experience. Palliative care is usually offered as well.

Fellowship applications are completed through the American Association of Medical College's Electronic Residency Application Service (ERAS), which is accessed online. Information regarding registration, policies, and procedures can be found on the ERAS website: [www.aamc.org/audienceeras.htm](http://www.aamc.org/audienceeras.htm).

### **Instructions to Applicants**

There is currently no match for geriatric medicine fellowships. Many but not all programs participate in ERAS. Applicants must be graduates of an accredited U.S. internal medicine or family medicine residency. Most programs require three letters of recommendation from your program director and other faculty submitted with the ERAS application. The personal statement and interview are important and offer you the opportunity to express your interest in geriatrics. Research interest and experience is appreciated but not required. Many programs will accept paper applications earlier than July 1.

### **Application Timeline for Fellowship Training Beginning July 1, 2014**

**Autumn 2013:** Program downloads the posted ERAS applications.

**Interviews will occur on a rolling basis beginning in August 2013.**

### **Application Requirements**

Applicants may submit the following materials via ERAS or in hard copy mailed to the program coordinator:

- Application form
- Two or three letters of reference addressed to Drs. Raik and Ouchida
- Current CV
- USMLE score report
- Copies of any publications
- Medical school transcript and/or MSPE if your school issues them
- Personal statement

### **Fellowship at Weill Cornell Medical College/NewYork-Presbyterian Hospital**

The primary goal of the Weill Cornell Geriatrics Fellowship Program is to train future clinical and academic experts in geriatric medicine. Clinical training occurs in all settings appropriate for a practicing geriatrician. These include acute-care hospitals, nursing homes, patients' homes, hospices, continuing care communities, and ambulatory clinics. Fellows fine-tune their teaching skills via lectures, supervision of medical trainees, and experiences in community health education. Research training begins in the first year with attendance at the Geriatric Society of America Conference, second year fellows will attend and present at American Geriatrics Society. Fellows are expected to pursue an individual mentored research project during their second year. Formal didactic experiences include a core curriculum in geriatrics, journal clubs, fellows' conferences, research seminars, grand rounds (medical and geriatric), and clinical conferences.

First-year fellows spend the bulk of their time in acute-care hospital and long-term care settings. First-year fellows participate in medical student and resident education and are expected to commence work on developing a research project for the upcoming year. Fellows also participate in continuity clinic and house call sessions.

Clinical training continues during the second year of the fellowship, but the focus shifts to the development and completion of the research project. Second-year fellows spend some time on acute-care and long-term care rotations in a junior faculty role, increasing their clinical independence. They also see their panel of patients at the Irving Sherwood Wright Center on Aging, go on house calls, and continue their didactic and academic experiences. Fellows typically present their research projects at a national geriatric medicine conference.

### **General Advice**

Geriatric medicine is still a “young” and under-populated specialty; many areas of research await investigation, and clinician-educators are in demand. Geriatricians must have a broad range of skills in teaching, clinical work, research, and administration. Successful applicants will demonstrate a sincere passion for and commitment to the care of older adults. They must also show an interest in both research and clinical practice. Applicants are encouraged to speak to the program staff or division faculty, both of whom will be happy to help them explore training and career options.

### **Contacts**

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Fellowship Coordinator

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## Health Services Research Fellowship Application Guide

Along with the ever increasing expansion of biomedical knowledge, there has been a growing demand to translate those gains into tangible improvements in patient outcomes, quality, safety and access in cost-effective ways. We also need to improve care and outcome for patients with chronic illnesses. To translate scientific advances to benefit patients requires innovative approaches that empower patients as active participants in their own care. Tailoring patient-centric interventions through shared decision-making that build their self efficacy and self management skills are all critical to improving outcomes.

Nationally, there is a shortage of investigators who have the theoretical and practical knowledge and skills to address these pressing issues in health services research. The Weill Cornell T32 Fellowship Training Program in Health Services Research, funded by the Agency for Healthcare Research and Quality, can help to provide the country with scientists to meet the challenges of translating research to care of patients, to develop new knowledge and strategies for improving the outcomes of individual patients and of populations, and to assess the impact of changes in the delivery and financing of patient care. The urgent needs of our underserved New York City patient populations have led us to recently develop a special focus on the challenges of urban health issues and afford a unique opportunity in the nation's largest city to prepare future leaders who can address the crises in minority communities.

### **Instructions to Applicants**

The Weill Cornell T32 Fellowship Training Program in Health Services Research does not participate in the National Residency Match Program. To receive an application form, please call (646) 962-5050.

**Application Deadline:** Applications are reviewed and accepted on a rolling basis.

### **General Application Timeline for Fellowship Training Beginning July 1, 2014**

#### **Spring 2013:**

Contact program coordinator to receive the T32 Fellowship Training Program Application: (646) 962-5050.

#### **Summer 2013:**

Begin to assemble application materials:

- 1. Request official transcripts** of all previous college and university work, including summer schools. A final transcript must be supplied after the completion of current degree requirements.
- 2. Request three letters of recommendation** from professors or other professionals with knowledge of your abilities in the areas of academic aptitude and achievement and/or in carrying out professional work and responsibilities.
- 3. Official GRE score reports** (Verbal, Quantitative, Analytical and Advanced); **Official MCAT score reports** (Verbal, Quantitative, Analytical and Advanced); **Official TOEFL score report** if English is not native language. These reports must be sent directly to the Graduate School of Medical Sciences by the Educational Testing Service in Princeton, NJ. *(If the applicant has an MD degree, this requirement is waived.)*
- 4. Work on a personal statement.** Please provide a concise description of your research experience and research interests. (Your essay should not exceed one typed page, single-spaced, and using a font not smaller than 12 points.)
- 5. An updated curriculum vitae**
- 6. Submit complete application to Program.**

**Fall/Winter 2013-2014:**

- Program reviews and contacts qualified candidates for interviews.
- Program schedules a full day of interviews with program faculty, opportunity to meet with current fellows and to participate in weekly Advanced Seminar in Health Services Research.
- Following interviews, Program notifies each candidate of status of application as soon as possible.

**Application Requirements**

- Application form
- Official transcripts of all college and university work
- Three letters of recommendation
- Official GRE, MCAT, and/or TOEFL score reports, if necessary (see Application Timeline, above)
- Research Interest Statement
- Personal statement
- Curriculum vitae

**Fellowship at Weill Cornell/NewYork-Presbyterian Hospital**

The goal of the T32 AHRQ Fellowship Program is to train post-residency physicians to conduct methodologically rigorous health services research in a multidisciplinary environment. The two-year training program requires participation in a formal curriculum designed to provide conceptual and practical foundations and skills in health services research. The curriculum provides knowledge and skills in the areas of outcomes, health services research, clinical epidemiology, behavioral science, biostatistics, ethics, health economics, decision analysis and health policy. In addition, trainees continue to participate in a series of multidisciplinary conferences and methodology meetings, as well as interact in their own weekly seminar, working with our faculty and each other to improve each other's projects. In accordance with program objectives, each trainee has begun to integrate his/her knowledge and skills to design and conduct his/her own original research project with the close supervision of the participating faculty.

Our strengths have been developing trainees to perform question-driven research in an area of their own interest, recruiting minority candidates, and requiring completion of a Master's Degree in Clinical Epidemiology and Health Services Research. Another strength of our program has been our multidisciplinary faculty with expertise in the basic sciences of clinical research, specifically in biostatistics, economics, clinical epidemiology and behavioral sciences. Many of our faculty are collaborating on major NIH-funded research initiatives. Our new strengths are our new collaborations with experts in social media, mobile technology related to health, implementation sciences and comparative effectiveness research.

At least 73 of the graduates from our fellowship program have appointments in academic centers. They are principal investigators or co-principal investigators on 155 grants. The current funding on grants for which they are principal investigators or co-principal investigator totals \$52,629,926. They have received funding from the National Heart Lung and Blood Institute, the National Institute on Aging, the National Institute of Mental Health and the New York State Department of Health, as well as from the Robert Wood Johnson Foundation, the Fan Fox and Leslie R. Samuels Foundation, the Arthritis Foundation, the Hartford Foundation, the Hyde and Watson Foundation, and the American Cancer Society.

Our program recruits individuals from underrepresented racial/ethnic groups and has an outstanding record of recruiting and retaining minority candidates with 32% of our past and current fellows being African American or Latino.

The fellows participate in the core courses of the [Master of Science Program in Clinical Epidemiology and Health Services Research](#) which is based in the Weill Cornell Graduate School of Medical Sciences.



The curriculum is designed to provide fellows with the conceptual and theoretical background and the practical knowledge and skills necessary to conduct interdisciplinary health services research. The courses are designed to give fellows a solid grasp of the fundamentals of conceptual and theoretical principals underlying health services, behavioral and clinical research. Fellows learn how and when to apply different research designs, quantitative, qualitative and mixed methods. They learn how to use existing measures, how to develop surveys and to create new measures to collect their own data. They learn sufficient computer programming and analytic skills to analyze their own data, including basic and advanced biostatistics techniques including hierarchical models, and structural equation modeling. They learn about decision analysis, economic analyses. They learn how to create surveys and analyze secondary data. They also learn about community-based research, and the importance of culturally adapting methods. They learn about how mobile devices and social marketing can be employed in health care. They will also learn recent lessons from implementation sciences and they learn about the responsible conduct of research.

**Research:** The Agency for Healthcare Research and Quality designates several priority areas for clinical research, therefore, during their fellowship training, fellows conduct research in these diverse priority areas including:

1. Translating Research into Practice and Policy
2. Patient Safety
3. Quality Improvement
4. Patient-centered Care and Education
5. Healthcare Disparities

### **General Advice**

To identify a fellowship program that meets your needs and interests we recommend that you directly contact the programs you are exploring. Try to identify graduates from the program who have already built a career in medicine similar to the one to which you aspire. It should not be a “heavy lift” for a program to assist with arranging a time for you to speak with a graduate. They should provide you with insight about their experience during their fellowship training as well as the career path they followed after completing their fellowship. T32 programs vary widely in emphasis so it is important to research information about the program to ensure that it is in line with your area of interest. Our T32 fellowship training program is research intensive. Programs that are parallel to our program are the GIM fellowship training programs and the RWJ Clinical Scholars Program. You should also consider whether you are going to be able to conduct your own research project during your training or if you are going to be “folded” into ongoing research that is being conducted. Doing your own research project, we believe, is important in laying the ground work for launching a career in research.

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## Hematology and Medical Oncology Fellowship Application Guide

Hematology and medical oncology are intimately connected, and most fellowship trainees select programs that combine hematology and medical oncology training for a three-year period. Per ABIM regulations, if an applicant enters a two-year fellowship in hematology or medical oncology alone and afterward wishes to train in the other subspecialty, two additional years of training (four years total) are required. Consequently, most fellowships consist of a three-year combined subspecialty program.

As with many subspecialties, applications are submitted via the Electronic Residency Application Service (ERAS), and most positions are filled via the National Residency Matching Program, Specialties Matching Service (NRMP/SRS). Information regarding registration, policies, and procedures may be found on the ERAS website ([www.aamc.org/audienceeras.htm](http://www.aamc.org/audienceeras.htm)). While not a requirement, most fellowship positions start July 1, and the match takes place in June of the *preceding* year. Consequently, programs generally start interviewing candidates *one and a half years* prior to the anticipated fellowship start date, and begin reviewing applications shortly after they become available through the ERAS system December 1 (19 months prior to the anticipated fellowship start date of July 1).

### **Instructions to Applicants**

#### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1553531051

#### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492155F1

#### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** August 30th, 2013

**Interview Dates:** September 2013 - November 2013

### **Application Requirements**

The ERAS application consists of:

- Medical School Transcript
- CV
- USMLE (board) scores or COMLEX (for DOs)
- Three (or more) letters of recommendation (one from your residency program director)
- MSPE or statement that your medical school does not provide an MSPE
- A personal essay

### **Fellowship at Weill Cornell/NewYork-Presbyterian Hospital**

The Hematology/Medical Oncology Fellowship Program in the Department of Medicine at Weill Cornell Medical College and NewYork-Presbyterian Hospital is a fully accredited three-year fellowship program leading to board eligibility in hematology and medical oncology. The Division comprises approximately 40 full-time faculty members, all of whom are involved in the training program.

Four fellows are matriculated into the program each year. The fellowship is structured in three one-year blocks. During the first year, fellows rotate among the various inpatient and outpatient hematology-oncology clinical services of the NewYork-Presbyterian/Weill Cornell Medical Center, an 850-bed academic hospital on the Upper East Side of Manhattan. The second year of the Hematology/Medical Oncology Training Program consists primarily of supervised laboratory and/or translational clinical research. With the guidance of

mentors, fellows gain experience in research design, research methodology and interpretation of data. Interested fellows are encouraged to simultaneously pursue a [Master's in Clinical Investigation](#) at the Weill Cornell Graduate School of Medical Sciences.

During the third year of training, fellows are encouraged to continue their research projects as well as consolidate their educational experiences in the diagnosis and management of hematologic and oncologic disorders. Third-year fellows have the opportunity to take clinical electives and to continue their rotations through both the inpatient and outpatient clinical services. Throughout the three years of training, each fellow manages his or her own panel of hematology/oncology patients in the weekly Fellows' Continuity Clinic, supervised by attending hematologist-oncologists.

### **General Advice**

The decision to pursue fellowship training in hematology and medical oncology directly after residency training must be made during the first half of the third year of residency, and the application must be complete by approximately August 1 of that same year (or shortly thereafter).

Research – basic, translational, and clinical—is an integral part of the fields of hematology and medical oncology. Even clinicians in private practice typically enter patients in clinical trials and must be familiar with research methodology. Top fellowship programs look very favorably at candidates with demonstrated success and/or interest in research. Make sure any research you have done is included in your application (even if in a different specialty). Letters of recommendation from research mentors are extremely helpful. Be prepared to discuss at interviews any research you have done.

If your primary experience is clinical and you have not yet developed significant research interests (as is often the case), it is crucial to consider what your research interests might be. Are you interested in the underlying cellular mechanisms of carcinogenesis? Which mechanisms? Are you interested in helping develop or test new anticancer drugs? If so, which types? Are you interested in specific diseases? Issues related to palliative care? Include in your application essay what your research interests might be, and be prepared to discuss them (however briefly — you are not expected to be an expert) at your interviews.

Hematology/Medical Oncology is a wide, interesting field, and the faculty at NYPH/WC can help you determine what your research interests might be.

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## **Infectious Diseases Fellowship Application Guide**

The Division of Infectious Diseases' Fellowship Training Program in Infectious Diseases at the NewYork-Presbyterian Hospital/Weill Cornell Medical College provides individualized training through faculty guidance, clinical rotations, mentored research, and didactic coursework. Our objective is to foster clinical and academic excellence. Graduates of the program are highly qualified for the practice of infectious diseases, bench and clinical research, and for leadership roles in medicine. Our clinical fellows have uniformly received university academic faculty appointments and/or positions in state, federal, or international public health organizations, following certification by the ABIM.

### **Instructions to Applicants**

WCMC requires that the submission of applications be through ERAS (Electronic Residency Application Service). Information regarding registration, policies and procedures may be found on the ERAS website ([www.aamc.org/audienceeras.htm](http://www.aamc.org/audienceeras.htm)). However, application deadlines and requirements are program specific, therefore you should also check individual ID program websites.

WCMC participates in the Medical Specialties Matching Program (MSMP). Check the MSMP website ([www.nrmp.org/fellow/match\\_name/msmp/dates.html](http://www.nrmp.org/fellow/match_name/msmp/dates.html)) for participating programs and specific dates in the year in which you apply. In general, you should anticipate gathering letters of recommendation during second year or early third year and writing your personal statement beginning in July of your third year of Residency.

### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1463521161

### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492146F0

### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** October 1, 2013

**Interview Dates:** September 2013 - October 2013

### **Application Requirements**

Applicants must be U.S. citizens or green card holders.

Applications must include the following documentation:

- All required ERAS Application fields
- Curriculum Vitae
- Residency Program Director's Letter of Recommendation
- 2 Additional Letters of Recommendation
- Personal Statement
- Photograph

### **Fellowship at Weill Cornell/NewYork-Presbyterian Hospital**

The Infectious Diseases Fellowship at NewYork-Presbyterian Hospital/Weill Cornell Medical College combines practice with research (laboratory, clinical, or epidemiologically based) and is designed to train physicians primarily for academic positions. Preference is given to candidates seeking at least three years of training. Fellows are eligible to sit on the Boards in the Subspecialty of Infectious Diseases after the second year of training.

The program incorporates traditional clinical activities with a minimum of 12 months on the inpatient consultation service at NewYork-Presbyterian/Weill Cornell and the Hospital for Special Surgery, and it includes rotations at the Memorial Sloan-Kettering Cancer Center. All fellows rotate through the epidemiology department and clinical microbiology laboratory. Training in sexually transmitted diseases is acquired through rotations in clinics of the New York City Department of Health.

Infectious disease fellows have continuity clinics in the Center for Special Studies HIV/AIDS clinics, which provide care to approximately 2,500 HIV-infected persons, as well as a general outpatient Infectious Disease Clinic. In addition, they have sessions in our Travel Clinic, which sees over 3,000 travelers annually and offers a unique opportunity to see a variety of infectious and tropical diseases.

The second and third years of fellowship emphasize basic, translational, clinical, or epidemiologic research at Weill-Cornell, Rockefeller University (including the Aaron Diamond AIDS Research Center), Memorial Sloan-Kettering Cancer Center, or other affiliated programs. Fellow research training is supported by an NIH-sponsored T-32 Training Grant. Additional training is available through master's degree programs in clinical investigation or clinical epidemiology/health services research, and other specialized training programs in preventive medicine and public health.

### **General Advice**

Think about what kind of Infectious Diseases career you want (clinical or bench research, private practice, etc.) and carefully review the program's information to be sure it will prepare you for it. Do the Fellows routinely receive research grants (NIH K awards, etc.)? What is the track record of Fellows after they leave the program? How many have faculty or government positions? Does the program have a T32 training grant to support Fellow research? Can you obtain auxiliary training (Master's in Clinical Investigation, etc.)? Do most Fellows do a two- or three-year Infectious Diseases Fellowship? Only two years are required for ABIM certification, but for academic research careers at least three years of Fellowship is the norm. Take time writing your personal statement to be sure it truly reflects why you are interested in Infectious Diseases and what your career goals are. A rehash of your statement from medical school or residency will not suffice. If possible, add something different or personal about yourself and your interests to help you stand out.

Carefully consider whom you ask to write your letters of recommendation. Most letters are "good"; therefore, a letter from a renowned Infectious Diseases expert who says that you are one of the top five people they have ever had in their laboratory will have more meaning than a letter from a new instructor in another subspecialty. However, you do not want a lukewarm letter from anyone. For academic/research programs it is useful to have publications, case reports and/or current involvement with a study. Be sure to do your homework before going to an interview. Write to politely ask if you might meet with people you've identified at the program who share your interests. During your interview, ask questions that are program specific. You don't want to come off as if this is just another stop on your tour. Follow up with an email of thanks, but be genuine. And if you are really interested, send a second email before the match lists are due outlining what you really like about the program and how it could help you meet your goals/career interests. If you don't get an interview somewhere, contact the Department of Medicine; someone can make a call for you.

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## Nephrology Fellowship Application Guide

Nephrology is a tremendously exciting subspecialty with a multitude of job opportunities. Care of patients with kidney disease encompasses all of internal medicine, including cardiovascular medicine, endocrinology, hypertension, immunology and metabolism. The career opportunities are broad – with academics, clinical care, clinical education, pure research and industry are all possibilities. The field also encompasses a broad spectrum of illnesses – from the stable patient with mild CKD, to the critically ill person in the ICU with multi-organ failure. Renal transplantation is an important aspect of nephrology. The excitement of a successful renal transplant that restores health to an individual with life-threatening chronic disease is one of the great triumphs of modern medicine. Medical residents do not have exposure to this process during residency, and thus may not have an idea of how exciting the field of nephrology has become. Most analyses project significant shortages in the Nephrology workforce in the next few years.

The NewYork-Presbyterian Hospital/Weill Cornell Nephrology Fellowship is a two-year program with eight fellows. Four are recruited each year. There are opportunities for fellows interested in research to complete an additional third year of fellowship in transplantation or hypertension. The general application process for Nephrology Fellowships involves completing an online application in the ERAS system. Information regarding registration, policies, and procedures may be found on the ERAS website ([www.aamc.org/audienceeras.htm](http://www.aamc.org/audienceeras.htm)).

### **Instructions to Applicants**

Applications should be completed through the American Medical Colleges' Electronic Residency Application Service (ERAS). After the application is complete the applicants must use the National Residency Matching Program (NRMP) to match to the program.

#### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1483521144

#### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1492148F0

#### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** August 31, 2013

**Interview Dates:** September 2013-November 2013

### **Application Requirements**

- Application via ERAS
- Enrolled in and planning to complete Internal Medicine Residency
- Personal Statement
- 3 letters of recommendation
- USMLE transcript
- ECFMG Status Report (International Medical Graduates)

### **Fellowship at Weill Cornell/New York-Presbyterian Hospital**

The New York-Presbyterian Hospital/Weill Cornell program is world renowned in the areas of transplantation, dialysis, and hypertension. Nephrology fellows rotate at Memorial Sloan-Kettering Cancer Center and obtain invaluable exposure to renal complications associated with cancer. The Transplantation Immunobiology Laboratory at Weill Cornell has a robust, NIH-funded research portfolio and has made seminal contributions to the field of transplantation, cancer research, and diabetes. Our fellowship provides trainees with an

unparalleled clinical and academic experience. Our patient population is broad based and diverse. Our teaching program is comprehensive and includes regular didactic lectures, clinical case conferences, renal pathology training, journal club and training in basic epidemiology and biostatistics. Residents who are interested are encouraged to meet with the Program Director, Dr. Phyllis August; the Division Chief, Dr. Manikkam Suthanthiran, and any of the key clinical faculty including Dr. Jeffrey I. Silberzweig (Rogosin Institute), and Dr. Ilya G. Glezerman (Memorial Sloan-Kettering Cancer Center).

### **General Advice**

NYPH residents who are interested in nephrology should take advantage of the wonderful opportunity to attend the American Society of Nephrology (ASN) Annual Meeting, which usually takes place the last week of October. The ASN has a sponsored residents' program and will reimburse the costs of residents attending the meeting. Please contact Sue Campus in the Division of Nephrology (212-746-4430) as early in the year as possible if you are interested in attending.

### **Contacts**

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## **Pulmonary Disease and Critical Care Medicine Application Guide**

The field of Pulmonary and Critical Care is an exciting mix of inpatient and outpatient medicine, and of acute and chronic disease. This training path allows for varied careers in basic science research, intensive care medicine, sleep medicine, interventional and office based pulmonary medicine. The majority of training opportunities are three-year combined programs leading to board eligibility in both pulmonary medicine and in critical care medicine and there exist extended fellowships for sleep medicine, interventional pulmonology and lung transplantation. Our aging population and the increasing disease burden of conditions such as lung cancer, asthma, COPD and sepsis have increased the need for research-minded, academic pulmonary and critical care physicians. Our program offers state-of-the-art clinical training and the opportunity to advance research with local and nationally recognized experts in the field of pulmonary and critical care medicine.

### **Instructions to Applicants**

Applications are invited from physicians who have completed an accredited three-year residency program in internal medicine. The NewYork-Presbyterian Hospital (Weill Cornell Campus) Pulmonary and Critical Care Medicine Division participates in the Medical Specialties Matching Program of the National Resident Matching Program (NRMP). Please complete an application online through Electronic Application Residency Service (ERAS).

### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1492156F0

### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 1563521083

### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** Application Review from July 15, 2013-August 20, 2013.

**Interview Dates:** September 2013- November 2013

### **Application Requirements**

A complete application packet includes:

- ERAS application
- 3 professional letters of recommendation
- ECFMG Certification (for foreign medical graduates)
- USMLE scores (for foreign medical graduates)
- Photo (optional)

### **Fellowship at Weill Cornell/NewYork-Presbyterian Hospital**

The Pulmonary Disease/Critical Care Fellowship Program offers fellows an exceptional opportunity to train in an urban environment where the spectrum of illnesses is vast and the acuity is intense.

The three-year fellowship program is designed to lead to certification in both pulmonary and critical care medicine. We are accredited by the Accreditation Council for Graduate Medical Education (ACGME) and normally two or three positions are available each year through the Medical Specialty Matching Program. We offer a structured curriculum encompassing rotations on our inpatient pulmonary consultation service, bronchoscopy/procedure service, pulmonary outpatient practice, and in the medical and surgical intensive care units of the medical center. There is teaching time dedicated to endotracheal intubation, endobronchial ultrasound (EBUS) and the use of ultrasound for invasive procedures.



Under the supervision of the division's clinical faculty, fellows receive training at NewYork-Presbyterian Hospital/Weill Cornell Medical Center. As part of the three-year program, fellows can elect to do up to one year of research, either laboratory or clinical research involving human subjects. Research opportunities are vast and recent projects have included translational work concerning sepsis, lung cancer and clinical trials using ultrasound for diagnosis of pneumothorax.

Ongoing educational activities include weekly case conferences, clinical research conferences, curriculum lectures in pulmonary and critical care, as well as monthly joint case conferences for pulmonary/critical care groups in the NewYork-Presbyterian Health Network, and the quarterly William A. Briscoe New York Lung Club, where pulmonary/critical care researchers from academic institutions and teaching hospitals in the New York metropolitan area meet to present and discuss new projects and data. Fellows also participate in a monthly journal club, sleep medicine grand rounds and a renowned interstitial lung disease conference.

### **General Advice**

Our program is interested in matching responsible clinicians who have demonstrated maturity, compassion, scholarship and integrity in their care of patients. Applicants should have some experience with clinical or bench research and should be interested in a career as a clinical scholar.

We require *3 professional letters of recommendation*. Please carefully consider whom you ask to write your letters of recommendation and discuss this with your program director or advisor. Sincere letters written by physicians who know you well are the most powerful endorsement for your application. Your personal statement should be honest and well written with correct grammar and no spelling mistakes. A mentor within the subspecialty is important in guiding your research opportunities as well as navigating the various career choices and modes of clinical practice that exist within the subspecialty. Any faculty member in our division is available to help you through the application process.

### **Contacts**

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## **Rheumatology Fellowship Application Guide Hospital for Special Surgery (HSS)**

There are approximately 110 training programs in rheumatology accredited by the Accreditation Council for Graduate Medical Education (ACGME). Virtually all of them, including the NYPH/HSS Rheumatology Fellowship Program, fill their fellowship positions via a Match conducted by the National Residency Matching Program (NRMP). The Internal Medicine Subspecialty Match is held in December of the year prior to the intended start of fellowship. The length of NYPH/HSS rheumatology fellowship training is three years, the first two of which are ACGME accredited. Fellows are eligible for subspecialty board certification in rheumatology after their second year of fellowship.

### **Instructions to Applicants**

Physicians who will have completed an ACGME-accredited internal medicine residency may apply to the HSS Rheumatology Fellowship Program. Applications should be submitted to the Electronic Residency Application Service (ERAS). Information regarding ERAS, registration, policies, and procedures can be found on the ERAS website: [www.aamc.org/services/eras/](http://www.aamc.org/services/eras/). Once all applications have been received and reviewed, applicants will be notified if a personal interview will be scheduled. HSS is an equal opportunity employer and does not discriminate with regard to sex, color, creed, religion, sexual preference, or disability.

In addition to submitting documents through ERAS, applicants must also register with the NRMP for the Match <http://www.nrmp.org/>.

All fellows are required to have a current New York State License and Registration at all times. Information and application for New York State License can be found at the New York State Education Department website: [www.nysed.gov](http://www.nysed.gov). Non-U.S. citizens/non-permanent residents ONLY may work with a Limited Permit to practice medicine in New York State. All fellows are required to maintain appropriate immigration status at all times. HSS sponsors a variety of visas for Foreign Nationals depending on the position, salary, and length of commitment. Once an applicant has made a firm commitment to Hospital for Special Surgery in regard to a fellowship, Human Resources will provide the forms that are needed to obtain the required information to access your potential for varying visas.

### **Electronic Residency Application Service (ERAS)**

**ERAS Program Code:** 1503521122

### **National Resident Matching Program (NRMP)**

**NRMP Match Number:** 10529663F0

### **For Fellowship Start Date of July 1, 2014**

**Application Deadline:** Application Review from July 15, 2013-August 31, 2013.

**Interview Dates:** September 2013 - November 2013

### **Application Requirements**

Please submit the following documents via ERAS:

- Application
- CV
- Personal statement
- Medical school transcript
- Medical school Dean's letter and/or medical school performance evaluation
- Three current letters of recommendation
- USMLE or COMPLEX score report

### **Fellowship at Weill Cornell Medical College/New York-Presbyterian Hospital/Hospital for Special Surgery**

The Rheumatology Fellowship Program at Weill Cornell Medical College/New York-Presbyterian Hospital is based at the Hospital for Special Surgery (HSS) and includes clinical and research resources at our neighboring sister institutions, New York-Presbyterian Hospital, Memorial Sloan-Kettering Cancer Center, and The Rockefeller University. Active links with a variety of disciplines in the Weill Cornell Graduate School of Medical Sciences (WCGSMS) are an integral part of the program, which is designed to train physicians interested in developing academic and clinical careers in rheumatology. The 4.5 acres surrounding HSS contain one of the largest concentrations of biomedical research and care anywhere in the world. A four-institution immunology program focuses internationally recognized scientists on solving the immunological puzzles that lead to autoimmunity and musculoskeletal disorders.

The fellowship program combines broad-based, in-depth clinical and research experiences in order to deliver the highest quality academic training to rheumatology professionals. Designed for three fellows each year, the program is flexible enough to allow for individual fellows' interests and needs. The first-year program is predominantly clinical but all fellows participate in research during their second and third years of training.

HSS is one of the largest musculoskeletal disease hospitals in the world. There are approximately 12,000 orthopedic and rheumatology admissions per year. Over 10,000 new rheumatology outpatients are seen in the ambulatory setting and there are 35,000 revisits each year. The Division of Rheumatology has its own ambulatory Infusion Care Unit where over 3,700 patients are treated with a variety of biologic agents and anti-inflammatory treatments yearly. HSS follows over 4,600 patients with rheumatoid arthritis and 1,500 patients with systemic lupus erythematosus. HSS is also notable for the size and expertise of its faculty and their commitment to teaching. There are 32 full-time rheumatologists with clinical and research interests encompassing lupus, scleroderma, myositis, vasculitis, inflammatory arthritis, outcomes research and musculoskeletal ultrasound.

The NYPH/HSS rheumatology fellowship clinical experience is focused on outpatient rheumatology clinics at HSS and inpatient consultation services at New York-Presbyterian Hospital and Memorial Sloan-Kettering Cancer Center. Didactic sessions include introductory rheumatology, immunology, clinical epidemiology and health services research lecture series, as well as a weekly journal club, consult rounds, bedside teaching rounds, radiology rounds, rheumatology grand rounds, and clinical pathology-radiology conferences.

Fellowship research projects generally tie in with ongoing research activities within the program. Suitable projects include investigations into the biological mechanisms of autoimmune, inflammatory, and musculoskeletal disease, and issues pertinent to clinical epidemiology and health services delivery in the rheumatic diseases. Each fellow's research experience is coordinated by a faculty mentor, as well as a mentorship committee. For fellows pursuing research on the immunological mechanisms of disease, the Graduate Program in Immunology sponsors weekly research seminars, weekly guest seminars, and a formal course in immunology. Fellows pursuing a project in clinical research are encouraged to pursue a certificate in clinical investigation or a master's degree in clinical investigation or public health. All fellows are expected to present the results of their research at regional and national meetings.

The Research Division at HSS, coordinates a broad program of research in musculoskeletal diseases, and also includes faculty from the basic sciences, orthopedics, biomechanics and biomaterials, tissue engineering, gene therapy, pathology, and anesthesiology. The Weill Cornell Graduate School of Medical Sciences WCGSMS program in immunology has 32 faculty members, including seven based at HSS in rheumatology and 12 based at the WCGSMS program in clinical epidemiology and health services. The research program at HSS is strongly supported by multiple federal and non-federal grants. A National Institutes of Health (NIH) T32 research training grant contributes financial support to the second and third years of the fellowship. The program also provides on-site research core facilities and specialists, including flow cytometry/cell sorting, molecular

biologists, analytic microscopy, specialists in research methodology and statistics, an outcomes research unit, and confocal microscopy. The research cores of our sister institutions support transgenic animal models, protein sequencing, and gene therapy.

### **General Advice**

Selection of fellows from among eligible applicants will be made on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation and integrity.

If you are interested in an academic career, it is important to demonstrate some research experience in your application. Letters of recommendation are also very important. A letter from a renowned rheumatologist who says that you are one of the top five people they have ever worked with will carry more weight than a similar letter from an instructor. At the same time, however, you should request letters from people who know you well and can attest to your strengths. Brief letters from famous people who spent very little time with you won't carry much weight.

### **Contacts**

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# APPENDIX

## A Practical Guide to the Fellowship Application Process

### Table of Contents

<b>1. Overview</b>	<b>38</b>
<b>2. Planning Your Application</b>	<b>39</b>
<b>3. Where Should I Apply?</b>	<b>41</b>
<b>4. The ERAS Application and EFDO</b>	<b>42</b>
<b>5. Advising</b>	<b>43</b>
<b>6. Letters of Recommendation</b>	<b>44</b>
<b>7. Preparing a CV</b>	<b>45</b>
<b>8. Personal Statement</b>	<b>46</b>
<b>9. Interviewing</b>	<b>50</b>

*Credit: Housestaff Committee, Summer 2011; Spring 2012; Spring 2013*

## 1. Overview

This guide is intended to be used as an aid during the fellowship application process for internal medicine residents at Weill Cornell/New York Presbyterian Hospital. We have made an effort to include information that is generalizable to any fellowship available through the NRMP Internal Medicine Subspecialties Match. Nearly all of the information contained herein is based on the collective experience of residents who have been through this process before. Thus, you should feel free to tailor any suggestions made to your specific situation.

## 2. Planning Your Application – The Timeline

*Note that this is a general guideline. Most items on this list are approximations. Hard deadlines will vary from program to program. Be sure to check with the programs you are applying to in order to be sure you have accurate deadline dates.*

### **PGY 2**

#### **January**

- Identify advisors to help guide you.
- Chief's offices will send out Schedule Preference Form. Please indicate you will be applying for Fellowships.

#### **February**

- Research program specific requirements and deadlines.
- Begin conceiving your Personal Statement. (The personal statement can be helpful to give to letter writers; it should be done before June).
- Touch base with your medical school to get procedures for releasing documents (Transcript, Dean's Letter) you will need for EFDO submission.

#### **March**

- Begin requesting letters of recommendation.
- Meet with your program advisor to request a program letter (see "Obtaining a Program Letter").
- Update your CV. Consider your overarching career goals and be sure your Personal Statement articulates your vision.
- Aim to have all additional recommendation letters requested.

#### **April-May**

- Spring Retreat with timeline and instruction provided by program leadership.
- Finalize your Personal Statement; get feedback from your advisor network.
- Meet with the program director and/or your advisor if you have not already done so.
- Follow up on recommendation letters.

#### **June (early)**

- Finalize your list of programs.

#### **June (late)**

- Purchase your ERAS Token (around June 15<sup>th</sup>) at [www.aamc.org/eras](http://www.aamc.org/eras).
- Enter Data into ERAS.
- Provide a copy of the ERAS Waiver/Cover Sheet to each and every individual writing letters on your behalf.
- Request your MSPE and Medical School Transcripts through EFDO.
- Submit your application. Have all documents submitted to EFDO at this time.

### **PGY3**

#### **July**

- Programs begin downloading applications, sending out interview requests. (Note: many programs download applications only once, all that the same time. It is important to know your deadlines and not be late.)

### **August-October**

- Register for NRMP match at [www.nrmp.org](http://www.nrmp.org).
- Schedule and attend interviews (some programs will not send out applications until later in this period).
- Stay in touch with advisors regarding programs you visit – plan a formal meeting with your advisor to discuss the rank list; have your top 2 or 3 choices in mind.
- Inform the Chief's Office of interviews you receive.
- Document all days away for interviews through Chief's Office (except those during your assigned vacation time).

### **November**

- Discuss your program preferences with your advisors; consider who is able to call for you if necessary.
- Enter your rank list into NRMP.
- **November 13<sup>th</sup>: Rank lists for programs and applicants are due**

### **December**

- **December 4<sup>th</sup>: Match Day!**



### 3. Where Should I Apply?

Former Residents are nearly unanimous in one sentiment: Apply Broadly! You should apply to any and every program at which you might be willing to train. In those rare circumstances where residents have been unable to procure a fellowship spot, it was likely largely due to their limited scope of applications (i.e. applying only to programs in New York City, etc.). That said, the identification of which programs one might be "willing" to train at will be different for each individual. There are many factors that influence this and will have to do with your geographic restrictions as well as your career plans (i.e., private practice versus academics).

#### **Factors to Consider**

- **Location** – Especially consider needs of spouse/partner, family concerns.
- **Quality of Training** - Both overall, and in your particular field or interest. Unfortunately, there are no *US News* Rankings for fellowships. This will be based on your discussions with fellows, residents and attendings.
- **Quality of Life** - Call schedule? Sink-or-swim vs. nurturing? Attending/fellow relationship? Work hours?
- **Duration of Training** – Surprisingly, this may differ between programs depending on subspecialty.
- **Practical aspects of training** - Access to emerging fields, adequate time/training for certification in particular areas
- **Specific bonuses** - NIH sponsored research years. Moonlighting opportunities.

#### **For More Information**

The Fellowship and Residency Electronic Interactive database (FREIDA) is a great resource. FREIDA can provide you with lists of programs by state and have a few tidbits of information on each. Their information is occasionally out of date, but they at least usually provide a link to the official fellowship program's web site. Once there, you should prepare a spreadsheet of the programs that you are interested in; at this stage, pay particular attention to the application **due date**, specific **requirements** (transcripts, etc.) and if they **do not use ERAS**.

#### **A NOTE: PROGRAM NAMES**

Be careful with program names. Several programs have very confusing nomenclature, including multiple programs with almost exactly the same name. People have applied to the wrong ones, and then found out too late in the game to reapply.

#### **A Note on New York City**

It is particularly difficult to match at programs here in New York City. This is because so many people want to do their fellowships in the "Greatest City in the World." If you absolutely need to stay in NYC, you must apply broadly. This means that you should at least consider expanding your focus to include Yale, Penn, and Stony Brook. If your reason for staying is a significant other, sit with them and discuss the possibilities of living midway between New Haven and NYC, for instance. Secondly, applying broadly means NOT just applying to the top couple of programs. Look at FREIDA, and start trying to find out which other programs are worth applying to. Once again, ask others for assistance, especially housestaff; they may have a broader view of what programs to apply to than attendings.

## 4. The ERAS Fellowship Deans Office (EFDO)

This office takes the place of the medical dean's office that you used during the residency application process. If you graduated from a foreign medical school, you are already familiar with the EFDO as they also process materials for all applicants from all non-U.S. medical schools.

### **Services Include:**

#### **Distribution of ERAS Tokens:**

In order to access the ERAS application, you must purchase a token through the EFDO. You may purchase them at [www.aamc.org/eras](http://www.aamc.org/eras)

#### **Processing of Letters of Recommendation:**

The EFDO website, which *must be accessed through the MyERAS application while logged in* is where you will print out cover sheets for your letter writers, the "ERAS Fellowships – Request for Letter of Recommendation Cover Sheet". A second coversheet can also be printed out from MyERAS. It is the Document Submission Form (DSF) and it must be completed on-line. Check either "I waive" or "I do not waive" my right to see this letter, sign the coversheet, and provide it to your letter writers. It is preferred that you waive your right to see the letter. We recommend attaching both the waiver/cover sheet and the DSF. Letter writers can either mail the packet directly to EFDO or ask the residency program staff to upload it through the Letter of Recommendation Portal. If you provide Cammie Liu (Dr. Logio's assistant) with the names of your letter writers, she can track your letter submissions and will access the online LoR portal to upload all of your letters.

#### **Processing of Medical School Documents:**

Your medical school transcript and MSPE (Dean's Letter) must be sent to ERAS directly from your medical school. A coversheet that is generated from EFDO must accompany your request. We recommend you initiate this process early, as getting documents from a medical school has proven to be a rate limiting step for people in the past. We recommend you request both documents even if your fellowships only want one or the other, you never know if you might need them.

#### **A Few Suggestions:**

##### **Give Yourself Extra Time:**

The EFDO can take up to two weeks to scan a document after they receive it, and it can take another 24 hours for it then to be uploaded to the ERAS post office. The EFDO traditionally recommends having all documents sent in sooner rather than later. The Residency Program Office has electronically uploaded letters of recommendation to ERAS for residents in the past. Check to see if this option will be available for you this application cycle.

##### **If Documents Go Missing, Follow up:**

If you have letter writers or a medical school that confirm something was sent but it doesn't show as received on the EFDO website or scanned into the ERAS post office, call EFDO (numbers are listed on the website). They actually have a fairly helpful customer service staff.

##### **Requesting USMLE scores:**

Some programs may require these. Depending on your scores, you may want to release these to all programs. To release your scores, go to MyERAS, and click on the Documents tab, then request your USMLE transcript. You can release scores to some or all programs depending on your preference. Note that the scores only transmit once, so if your Step 3 score has not yet resulted as of the day that you submit your request to release your scores, your Step 3 score will not be sent to programs.

## 5. Advising

The advising process for fellowship is necessarily more free form than residency. It is important to develop a network of people who will be able to guide you.

### **Your Faculty Advisor:**

The same advisor you meet with for your bi-annual reviews will function as your main interface with the program leadership during the fellowship application process. It is this person who will draft your Program Letter (more on this later), and be responsible for knowing where you are in the process. In order for them to be most helpful to you, plan on meeting with them about applications at the end of August or early September. At that time, attempt to have prepared your CV, a personal statement draft, and a preliminary list of places you may be interested in applying. Stay in touch regarding progress on getting interviews, and program impressions as you progress through the process.

### **Subspecialty Advisors:**

These are important to identify early on. Once you have made a decision on a subspecialty, try and find people who can help guide you in achieving your professional goals. Most often, this is done informally based on interactions you have with specialists, however, your program advisor, Dr. Logio, Dr. Schafer, the Chief's office, and other residents can also help you get in touch with appropriate faculty.

### **Program Director:**

Every fellowship applicant should consider meeting with the program director early in the process. Have your CV and Personal Statement completed at this time, as you will be getting feedback on both. It is also helpful to have a preliminary list of places you may be interested in going.

### **Chairman:**

The Chairman is available to you for career advice early in the process of deciding on a specialty and which programs may be best suited for your particular area and interests. You may also want to meet with him once you've made your final rank order list.

## 6. Letters of Recommendation

### **Whom to Ask:**

Most programs want 3-4 letters. Letters should come from people who know you well, who can comment on how your strengths.

A.) Program Director letter. This is mostly written by your advisor, based on your evaluations and other documents accumulated over the course of your training. This letter is then reviewed and enhanced before signed by Dr. Logio.

B.) Letters from within your Subspecialty. This may include 1-3 letters. At least one letter should come from someone who can comment on your clinical skills. If you engaged in research, one of these letters should certainly come from your Research Mentor.

C.) Additional Letters. To round out your letters, you may want to include a letter from a faculty member who is outside of your Subspecialty. This may include a Hospitalist, an Attending in a different Subspecialty, or your WCIMA PIC. A strong letter from someone who knows you well even if outside of your subspecialty is often superior to a weaker letter from someone within the subspecialty who does not know you well.

### **How to Ask:**

- Ask for letters early
- Try to set up in-person appointments to meet with prospective letter writers. This is more personal than email requests
- Provide a CV and Personal Statement, in addition to ERAS Cover sheet
- You may want to provide helpful suggestions on what types of themes/elements to include in the letter
- Be sure to kindly remind letter-writers about deadlines and reinforce this as that date approaches

## 7. Preparing a CV

The curriculum vitae or CV is a longer, more detailed synopsis than a resume. It includes a summary of your educational and academic background, teaching and research experience, publications, presentations, awards, honors, affiliations, etc. Your CV is essentially a biographical write-up of your personal academic career. It is a statement of your academic accomplishments in an easy-to-read format.

Your CV should be clear, concise, complete and up to date. The exact length and format of an academic CV is not set in stone. Tailor the length and level of detail of your CV depending on your audience. Ask friends and your advisors to review, proofread and edit your CV for clarity and polish. You might also want to politely ask your advisor or one of your other mentors to show you their CV to give you a sense of how to format and structure yours.

### General Outline

- Identifying Information (name, address, email address, phone number)
- Education
  - Academic Training
  - Postgraduate Training
- Current Position
- Work Experience
- Research Experience
- Licenses, Certifications, and Board Qualifications
- Honors/Awards
- Activities
  - Committees, Editorial Work, etc.
- Publications
- Presentations, Abstracts, and Scientific Meetings
- Affiliations
  - Professional Organizations
- Other Work Experience
- Personal Data (Languages, Achievements, Volunteering, etc.)

### Tips:

- Be sparing in your use of fonts
- A nice simple template is best
- Use action verbs
- Check the names and dates listed in your CV
- Keep your CV up-to-date and honest
- Put on your calendar to update your CV every two months

## 8. Personal Statement

Every fellowship application requires a statement that asks, in one way or another, for the candidate to describe their academic or other interests. This personal statement is your introduction to the selection committee. It is an essay which is designed to give the selection committee a sense of who you are and how closely your goals and strengths match the ideals of a specific fellowship. It provides an opportunity for you to distinguish yourself from other applicants. Because this statement is personal, there is not one format or approach that will work well for everyone. You have a great deal of flexibility on how to present your thoughts, but you should be sure to cover the following basic points:

- Your qualifications for a given fellowship
- How the fellowship fits in with your personal and professional goals

Use your personal statement to say what is most important to you. The essay is an exercise of self-reflection. A personal statement is generally most effective when it concentrates on:

- An issue or experience that you feel strongly about, or one that has helped to shape who you are
- A significant accomplishment or contribution you have made to your field of interest

A selection committee may read hundreds of essays back-to-back in a short period of time. Readers look for essays that:

- Make sense – logically, grammatically, thematically
- Are a pleasure to read
- Engage their attention
- Provide substance and relevant information
- Stands out from the crowd

### General tips:

- Keep it simple, keep it short – **1 page maximum**
- Be honest with yourself
- Take time to think about who you are, your values, your priorities, your goals
- Think about the individuals, experiences and challenges that have influenced your career goals
- Do not try to guess what the committee wants to read
- Maintain focus with a consistent story line
- Open the essay with a strong paragraph that provides a framework and introduces critical elements that you intend to explore in the main body of the essay
- A unifying theme will help you organize your ideas, select supporting evidence of your achievements and provide a roadmap for your readers. Your personal statement should flow naturally.
- Provide a compelling snapshot of who you are and what contributions you have made
- Indicate what your priorities are and the kind of passion you bring to your work
- Focus on a few, well-chosen examples. Depth is better than breadth. Select experiences that have been most important to you.
- That said....don't obsess over the personal statement. Focus on it, do your best, and edit it thoroughly, but don't neglect the rest of your application.

### Avoid:

- Melodramatic or self-congratulatory statements
- Vague, abstract ideals
- Laundry list of achievements
- Convoluted syntax
- Religion and politics

Revise, revise, revise! You may go through many drafts of your personal statement. Ask your friends, fellows you know and your advisors to review your personal statement and offer suggestions. Your personal statement should accurately express who you are.

And remember, the program director and your advisor are both available to help you revise these important documents!

## **Sample Personal Statements**

### ***Personal Statement #1***

My pursuit of a career in academic cardiology is driven by my research endeavors and clinical experience. What began as a fascination with cardiac physiology has since matured into a polished career plan.

Academic research first captured my interest during college. As a senior studying neurobiology at Fictitious University, I became invested in a project examining the neural pathway of drug reward. I came to appreciate the utility of animal models as well as the intricacy of experimental design, data management, and manuscript preparation. This research will ultimately lead to publication in a scientific journal as first author. More importantly, this experience sparked my interest in scientific research. Since then, I have sought to prepare for an independent academic career.

My enthusiasm for academic research later found a subject matter of equal appeal while in medical school at Nice Private University. Cardiology captured my interest immediately and completely. As my knowledge base grew, I was impressed by the ability of imaging techniques to characterize physical parameters non-invasively and to impact clinical decision-making. Working closely with a cardiologist specializing in echocardiography and cardiac MR, I applied my previous experience with animal modeling to several research projects. My work characterizing a murine model of hypertrophic cardiomyopathy using cardiac MR will result shortly in a first authorship publication, while some of my other work has already resulted in co-authorship. This apprenticeship cemented my interest in academic cardiology and provided a true mentor for my career.

During my current residency at Cornell, I have dramatically expanded my clinical abilities. Whether managing acute presentations on the wards or serving as a primary care provider in our busy urban clinic, I take great satisfaction from the personal connection made with individual patients. My experiences in the CCU, on the telemetry floor, and on the cardiology consult service have fueled my excitement for cardiology, which has grown steadily in concordance with my clinical knowledge and leadership abilities. From casual lectures on rounds to presenting at formal clinical conferences, teaching has remained both my priority and my pleasure throughout my training.

In addition to my clinical responsibilities at Cornell, I continue to participate in research. In the electrophysiology division, I contribute to ongoing work investigating the role of microvolt t-wave alternans testing, which is a potential predictor of dysrhythmias and sudden cardiac death. Still drawn toward work in non-invasive imaging, I have begun collaborating on several studies that aim to expand the clinical application of cardiac MR. One study will define the gold standard of ventricular mass and volume determination, while another compares echocardiogram to cardiac MR for the detection of post-myocardial infarction thrombus formation.

My career goals follow logically from my interests and experiences. I plan to pursue a career in non-invasive cardiovascular imaging, where I will continue to contribute to both clinical and translational research. The emerging role of cardiac MR, and other frontiers in imaging remain my central interest. Through cardiovascular

fellowship I plan to develop sound clinical training in the sub-specialty, and prepare for an academic career. I ask you to consider my accomplishments and commitment to the field.

### ***Personal Statement #2***

My interest in cardiology stems from the desire to enter a field that offers both academic and clinical fulfillment. With this goal in mind, I have focused my energies on honing my clinical skills while continuing to build a solid foundation in research. My aim is to train as a cardiologist so that I can build a successful career and contribute to the development of evidence based medicine.

I first became involved in academic research while an undergraduate at Small Liberal Arts College when I was selected to join the Presidential Scholars program. Working with Dr. Robert Jones on the molecular structure of the sodium ion channel, I discovered that the intellectual pursuit of research inspired me. Upon graduation, I was awarded the Francis L. Town Scientific Prize for my work. Seeking to apply my newly minted technical skills to a more clinical project, I then worked with Dr. Richard Smith at International Medical School creating chimeric immunoglobulin – T cell receptors to t cancer antigens. My successful completion of the chimeric DNA construct formed the underpinning of the team’s eventual completion of a targeted gene therapy that went on to human clinical trials.

During medical school at Big Research University, it became clear to me that I would pursue a career in cardiology. In Dr. Victor Stein’s laboratory, I was engaged in translational research using a rat model of myocardial infarction and heart failure. Using non-invasive imaging techniques such as cardiac MRI, SPECT and PET, I co-authored several papers examining the utility of these various methodologies in determining cardiac viability after myocardial infarction. This experience inspired me to apply the skills I had learned in protocol design and implementation to a clinical problem I had encountered in the clinics. I subsequently co-authored an abstract examining the rates of deep vein thrombosis in various services at our institution, and found a surprisingly high number were associated with intravenous catheters, several of which led to pulmonary emboli. While treating individual patients remains a primary goal, this experience showed me the value of aggregating data and its potential applications to clinical practice.

As a resident at New York-Presbyterian/Weill Cornell, my dedication to cardiology has only deepened as I have become more immersed in patient care. During my rotations in the cardiac care unit, telemetry floor and the cardiology consult service, I am constantly amazed at the fulfillment I find in caring for individuals and unraveling difficult diagnostic dilemmas. The pace and complexity of cardiac care inspires me, as does my new role as a team leader and teacher.

During my time at Cornell, I have been actively involved in research in the electrophysiology division, evaluating the use of implantable cardiac defibrillators in various subgroups, including patients who have sustained cardiac arrest following cardiac surgery and during dialysis. I am also interested in how non-invasive imaging techniques can help define populations at risk for future arrhythmia and cardiac arrest, particularly the use of novel approaches such as cardiac MRI and CT. I plan to continue along this path during my academic career, helping to apply evidence-based data to clinical practice.

### ***Personal Statement #3***

My interest in the field of gastroenterology stems from my medical school experience in the field and my research background. After a consultation service elective piqued my interest during medical school, I decided to work in the Division of Gastroenterology and Hepatology at Weill Cornell Medical College. While working on the gastroenterology service, I discovered that I enjoyed diagnosing and treating gastrointestinal diseases. I was also fascinated by the research being conducted in the field, particularly in the area of inflammatory bowel disease. This led me to seek out my own research opportunities.



During medical school and now residency, I have been participating in several research projects with Dr. John Smith. For one project, we reviewed the extra-intestinal manifestations of inflammatory bowel disease, and our results were published as part of the *Pocket Guide to Inflammatory Bowel Disease*. This topic was particularly interesting to me because of the natural history and immunogenetic associations between many extra-intestinal manifestations and new potentially beneficial treatment options. In addition, I collaborated on a paper published in *Gastroenterology and Endoscopy News* that analyzed the impact of 5-ASA preparations on patients with inflammatory bowel disease. Specifically, we explored how molecular diagnostic tests will redefine the pathobiology of IBD by characterizing the diversity of mucosal immune responses to luminal bacteria. We also discussed the evolution of diagnostic antibody profiling and how it may allow physicians to individualize therapy.

I also assisted in writing a review of proximal Crohn's disease for a chapter in *Inflammatory Bowel Disease: The Complete Guide to Medical Management*. This chapter defines proximal Crohn's disease and discusses the differential diagnosis of, and medical and surgical therapies for, the disorder. We concluded that new diagnostic techniques, such as endoscopy, chromoendoscopy, and wireless capsule endoscopy, have allowed physicians to increasingly recognize proximal Crohn's disease. This may define an immunologically vulnerable subset of ulcerative colitis patients who may behave phenotypically more like Crohn's disease and who might respond to different therapies.

In addition, my medical research experience extends beyond the field of gastroenterology. As an undergraduate, I took part in a project investigating the use of Her-2/neu testing in breast cancer prognosis and treatment. Following my first year of medical school, I contributed to a joint research project between the Departments of Neurology at Weill Cornell Medical College and Memorial Sloan-Kettering Cancer Center that focused on how both cancer-specific and traditional risk factors cause cerebrovascular disease in cancer patients. The study assessed several factors important for stroke prevention and treatment in cancer patients, including the extent of neoplastic disease, cancer type, and stroke etiology, for their effect on the outcome of patients. The results of this study, which were published in *Neurology*, suggest that having knowledge of the underlying neoplasm in cancer patients who develop strokes may assist in making accurate diagnoses and have a profound effect on patients' prognoses.

Recently, I have drawn on my early research topics for a project investigating the use of serologic profiling in determining ulcerative colitis patient responses to infliximab. Similar to the way the Her-2/neu oncogene is used in breast cancer to help determine treatment options, serologic profiling may one day have a profound impact on choice of treatment for patients with inflammatory bowel disease.

My medical experience thus far has demonstrated to me that gastroenterology is an expanding field with opportunities for translational research and advancement at the molecular and clinical level. Ultimately, I hope to further the progress and advancements that have been made by engaging in research, patient care, and teaching. Because I enjoy both practicing and conducting research in the field, my decision to pursue a fellowship in gastroenterology was an easy one.

## 9. Interviewing

### Interview Basics

- When meeting with people, be sure to shake hands, make eye contact.
- Interviews can be one on one (most common), two on one, or up to five on one.
- You can have 2-3 interviews (most common), or up to SEVEN interviews.
- Some interviews are more formal than others, and some aren't; remember that interviewers are trying to assess how you will be as a colleague as much as anything else.
- It's illegal to ask applicants about ranking, marital status, having children, etc. But it is acceptable for you to bring up these topics.
- It's illegal to ask applicants about ranking, but you can say whatever you want. So if you already know you're very interested, let them know that you are and that you'll be back for a second look.
- Thank the interviewer at the end, and be sure to get her/his business card to be able to follow up.

### Interview Tips

- **Professionalism:** You're not applying for medical school as a college student; you're applying for a job. Essays and letters should be matter of fact and professional, and the same goes for your appearance. (Dress professionally.)
- **Getting the interview is half the battle:** Unlike residency, fellowship programs are small. Being invited for an interview means that your application has culled from over five hundred to about fifty; most of which are similar in terms of quality, letters and publications. Keep that in mind, and be confident (without being over-confident). Your goal is to make it to the top ten on the program's rank list, and programs want to meet you to see who they can work with, and who can be part of their team.
- **The interview is your opportunity:** It's your opportunity to see and be seen. You get to learn about the program and the fellows, and see if it's the kind of place you'd like to spend three years. Additionally, this is your chance to let them see who you really are, above and beyond what is on the piece of paper you submitted. So don't be nervous; this is not a test or a challenge, it's your opportunity.
- **Be on time.**
- **Transportation:** It's important to plan ahead to figure out how you're going to get to the hospital. Ask people who applied before, print out of all the Google maps that you'll need, etc. Don't wait until the night before, because even if the program is in NYC, if it's outside Manhattan you'll need to find out how to best get there (cab, subway, LIRR, car rental).
- **Ignore the other black suits:** Don't let the fact that there are other applicants around stress you out.
- **Know your stuff:** If it's on your resume, you had better be able to back it up in a clear and knowledgeable way. Med school research project, undergrad award, or "special interests;" it's all fair game.
- **Know your research:** Be prepared to talk about your research at every turn. Make sure you can talk about your research project and your involvement in it in a detailed manner. Know the literature regarding your research (If you're talking about CT angio, you should know what data is already out there, how your results fit in, etc).
- **Know your "story:"** You want to leave the interviewer with a clear idea of who you are. For example, "The Cornell guy who is interested in hepatology and translational research," or whatever. Your story shows the program that you are interested, dedicated and smart enough to speak about it coherently.
- **Know your field:** Keep an eye tuned to major recent developments in your field, especially if it pertains to your research. It's not unfair for programs to want fellows who are interested enough to actually keep up with what's going on in their field.
- **Know your interviewer:** When possible, look up your interviewers on PubMed (or at least scholars.google.com) ahead of time. Even if you don't have time to read all of their articles, just knowing what the interviewer does and being able to talk about it briefly (especially if it's related to your work) can make a difference.

- **Find Cornell Alums:** If there is a Cornell alum where you are applying, contact him or her before the interview day. They will be a valuable point of reference.

### **Sample Interview Questions**

- Tell me about your research.
- Why do you want to be a \*\*\*\*-ologist? doctor?
- Where do you see yourself in ten years? (Very common)
- What are your career goals? (Very common)
- How do you think you'd fit in at our program? Or, why are you interested in our program?
- What are your strengths and weaknesses?
- Do you have any questions about our program? (You should always have questions to ask.)
- Why do you want to come to (our program)?
- What are you looking for in a program?
- What do you know about our program?
- What contribution can you make to our program?
- What are your interests outside of medicine?

### **How do I get there? (NYC tips)**

- LIJ/North shore: Rent a car. The LIRR will only get you as far as the train station and it's hard to find a cab. Also, they expect you to visit both campuses in one day, and do not provide a shuttle bus.
- Stonybrook: Rent a car. It's over two hours away.
- Montefiore: Tricky, because there are two campuses that you may visit in the same day. Some days you start at one campus and some days the other, so be careful. Subway + walking is doable, others have taken cabs or car services (in the \$50 range).
- St Lukes: interviews are at St Lukes near Columbia's undergrad campus (not at Roosevelt in midtown).

### **Frequently Asked Questions**

#### **What if I don't hear?**

- If you don't get an interview at a program that you are very interested in, speak to Dr. Logio or your faculty advisor. The program is happy to advocate for you or to intercede on your behalf.
- If they've already said no to you, there's no downside. And if you eventually get the interview, you're back in the game on a level playing field. Interviewers likely won't have any idea how you got there, just that you're there.

#### **When are interviews?**

August-October

#### **When should I set up the interview?**

It's best to reply to interview requests early, as slots fill up. And don't forget to let the residency program office know you have an interview. You'll need to contact the Chief's office to request coverage ASAP once you have a date in place.

#### **Is it better to interview early in the season?**

Perhaps; Interviewers and fellows are less distracted then, and likely to be more engaged.

#### **Should I write thank you notes?**

Yes. Email is the most common way to send thank-you notes today. Be sure they are personalized and include specific information about your interview experience or reference what you discussed in the interview. With that in mind, make sure you get a business card from everyone you email with (or at least their email address).