Welcome to Columbia University Department of Obstetrics and Gynecology! The Obstetrics and Gynecology residency program at Sloane Hospital for Women at NewYork-Presbyterian/Columbia University Irving Medical Center is an exciting, fast-paced program which provides trainees with a wealth of clinical experience and exposure to all facets of our wide-ranging and rewarding specialty.

New York City has been at the center of the coronavirus pandemic in the United States, and everyone in the NYP/CUIMC has been affected by it, from our frontline healthcare workers to our students and neighbors. Our clinicians and researchers including our residents have shown incredible leadership during this difficult time, publishing leading-edge research about our pandemic response.

Our residency program is filled with bright, energetic physicians who are not only stellar clinicians, but are also extremely well-versed in the literature of our field. During the course of their training, our house officers gain experience in managing virtually all of the problems that could confront a practitioner in our discipline.

Our department is home to one of the largest and most respected faculties of any department in the nation. Within the Morgan Stanley Children’s Hospital, we have facilities like the Center for Prenatal Pediatrics and the Mothers Center, along with a state-of-the-art Labor and Delivery Unit and Level III Neonatal Intensive Care Unit that is second to none.

We also have the privilege of being surrounded by extraordinarily talented colleagues in every specialty at the Vagelos College of Physicians and Surgeons and NewYork-Presbyterian Hospital, which allows us to offer world-class, comprehensive care to virtually any patient admitted to our service.

We care for a broad range of publicly and privately insured patients from around the world as well as those from the surrounding neighborhood of Washington Heights. We are located in one of the largest, most diverse cities in the world and serve a patient population that presents us with genetic, medical, and surgical challenges of incredible complexity on a daily basis. We proudly serve our community and enjoy training the next generation of leaders in the field.

Our program is a rigorous but rewarding endeavor, which culminates with the graduation of physicians who have superb clinical skills and the academic foundation to prepare them for any fellowship or practice opportunity.

We invite you to come and meet with us. We are proud of who we are and what we do, and we are always looking for more bright and talented people to join our team!

Mary E. D’Alton, MD
Chair, Department of Obstetrics & Gynecology Columbia University Irving Medical Center
Fast Facts About Our Department

- Ranked #13 for Gynecology nationwide by *U.S. News and World Report*. NewYork-Presbyterian is ranked #1 in the State of New York by *U.S. News*
- Ranked #8 in *U.S. News and World Report* for women’s health programs at top medical schools
- Received more than 800 applications for the Class of 2027 for six residency openings
- 18 resident publications in 2022-2023 academic year
- 105 full-time faculty
- 57,430 unique patients served in FY2023
- 6,078 deliveries in FY2023
- Performed the first laser photocoagulation surgery to treat twin-to-twin transfusion syndrome in New York City
- 91 active funded research projects
- Ranked #5 in National Institutes of Health funding

Residency Duration

The Obstetrics and Gynecology residency program is fully accredited by the Accreditation Council for Graduate Medical Education (ACGME) for six residents per year in the four-year program.

Prerequisite Training and Selection Criteria

Our selection criteria are consistent with the ACGME General Requirements and Columbia University Irving Medical Center’s Equal Employment Opportunity and Hiring Guidelines. Columbia University residency programs do not discriminate with regard to race, color, religion, national origin, handicap, veteran status, sexual orientation or preference, sex, or age.
HISTORY

The Sloane Maternity Hospital opened in 1887 as New York City’s first medical facility dedicated to women’s health. It was established with a benefaction from William D. Sloane and his wife, Emily Thorn Sloane, the granddaughter of Cornelius Vanderbilt. The goal was to endow a modern institution to treat women and educate midwives and obstetricians. In 1928, the Sloane Hospital for Women moved to its present site and became the obstetric and gynecologic service for Columbia-Presbyterian. Today, The Sloane Hospital for Women continues to lead the way in advancing women’s health, and is now one of the preeminent obstetric and gynecologic programs in the world.

OUR MISSION

As major institutions of higher learning, NewYork-Presbyterian Hospital and Columbia University Vagelos College of Physicians and Surgeons are deeply committed to residency training. Education is an integral part of the tripartite mission of the Department of Obstetrics and Gynecology, along with patient care and research. As a world leader in women’s health care, our goal is to provide the finest comprehensive training for our future practitioners in our specialty by using the latest knowledge and innovative research to provide the community at large the highest quality patient care.

Our program benefits from being affiliated with both an Ivy League institution and a world renowned hospital. All of our clinical services are based at NewYork-Presbyterian Hospital, one of the most comprehensive university hospitals in the world, with leading specialists in every field of medicine. With our dedicated staff, modern facilities, state-of-the-art technology, commitment to quality care, and our role in educating future physicians, NYP/CUIMC has earned a reputation as a world class teaching hospital.

House officers hold academic appointments as Postdoctoral Residency Fellows of Columbia University Vagelos College of Physicians & Surgeons. As an important part of their learning experience, residents are expected to teach, supervise, and evaluate medical students on all services.
Family Planning and Preventative Services
Interim Division Chief: Paula Castaño, MD
Our specialists in Family Planning bring expertise in assisting women with chronic and complex health conditions to make informed choices about contraceptive options. Our faculty members are involved in the development of novel contraceptives and work to increase access to contraception and women's health services. The division also trains residents to perform minimally invasive surgery and conduct clinical research.

General Obstetrics & Gynecology
Division Chief: Cassandra Simmons, MD
The Division of General Ob/Gyn offers patients comprehensive obstetric and gynecologic care, including a wide range of consultation and treatment options, from routine well-woman care to the most advanced diagnosis and treatment of obstetric and gynecologic problems for women of all ages. Our physicians deliver approximately 4,800 babies each year.

Gynecologic Oncology
Division Chief: Jason Wright, MD
The Division of Gynecologic Oncology participates in nationally-recognized, interdisciplinary programs supported by the Herbert Irving Comprehensive Cancer Center to advance research and training and discover the best approaches for cancer prevention, diagnosis, and treatment. Research includes ovarian cancer, chemotherapy resistance, clinical trials, and investigating the development of cervical dysplasia.

Gynecologic Specialty Surgery
Division Chief: Arnold P. Advincula, MD
Our Gynecologic Specialty Surgery team offers comprehensive gynecologic surgical care for women of all ages. Our surgeons are leader in minimally invasive gynecologic surgery and employ the latest technologies to treat various female reproductive tract disorders. They strive to take the least invasive approach to surgery whenever possible, using laparoscopic and robotic techniques to minimize patients' recovery times.

Maternal-Fetal Medicine
Division Chief: Lynn Simpson, MD
Columbia's Maternal-Fetal Medicine specialists are leaders in caring for expectant mothers with high-risk health conditions, fetal abnormalities, or obstetric complications. The division contains multiple centers dedicated to high-risk obstetrics, including the Center for Prenatal Pediatrics, the Mothers Center, and the Preterm Birth Prevention Center. Faculty train residents to manage high-risk pregnancies within a supervised environment.

Reproductive Endocrinology and Infertility
Division Chief: Zev Williams, MD, PhD
The Division of Reproductive Endocrinology & Infertility sees patients in a brand-new fertility center with a state-of-the-art IVF laboratory. Our fertility team focuses both on cutting-edge innovation and patient experience. Our physicians have successfully treated many patients who have struggled for years with issues related to infertility and recurrent pregnancy loss.
APPLICATION, INTERVIEW, AND BENEFITS

We will be accepting applications via the Electronic Residency Application Service (ERAS) through October 1, 2022. All applications MUST be complete for an applicant to be considered for our program. This includes the following:

- A completed AAMC-NRMP application for residency
- An official copy of your USMLE scores
- An official medical school transcript
- A minimum of three recommendations from faculty members familiar with your performance
- Dean’s Letter

A carefully selected pool of applicants will be offered interviews on campus. Invitations to interview will be sent in mid-November and interviews will be held on the following dates:

- Thursday, November 16, 2023
- Thursday, November 30, 2023
- Thursday, December 7, 2023
- Thursday, December 14, 2023

Sample Interview Day

The following general schedule will apply for both the morning and afternoon interview sessions:

- Meet the program directors
- Morbidity and Mortality and Grand Rounds
- Program introduction
- Faculty interview 1
- Faculty interview 2
- Resident interview
- Program director interview
- Virtual Tour

Salary and Benefits

Salary stipend for the 2023-2024 academic year is as follows:

<table>
<thead>
<tr>
<th>Resident Level</th>
<th>Salary</th>
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<tbody>
<tr>
<td>PGY-1</td>
<td>$81,000</td>
</tr>
<tr>
<td>PGY-2</td>
<td>$89,700</td>
</tr>
<tr>
<td>PGY-3</td>
<td>$97,000</td>
</tr>
<tr>
<td>PGY-4</td>
<td>$99,800</td>
</tr>
<tr>
<td>PGY-5</td>
<td>$103,200</td>
</tr>
<tr>
<td>PGY-6</td>
<td>$105,000</td>
</tr>
<tr>
<td>PGY-7</td>
<td>$108,200</td>
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</tbody>
</table>

A meal card is provided for on-call meal expenses. Housing stipend of $7,500 (paid quarterly).

Diversity, Inclusion, and Belonging

We recognize the vital need for diversity and inclusion at all levels of our organization. In order to continue and expand upon our tradition of excellence in clinical care, research, and education, it is essential that our faculty, fellows, and residents represent a range of perspectives, backgrounds, and life experiences, and reflect the diversity of patients we serve. We recognize that working toward inclusivity and against inequality and implicit bias is an ongoing process, and we are committed to engaging in it. To learn more, visit obgyn.columbia.edu/diversity.

Vacation

Residents receive four weeks of vacation each year, generally taken one week at a time.

Educational Benefits

Each resident is sponsored to attend at least one national conference during the course of their training, and are also provided an education stipend.

Medical Benefits

Residents participate in NewYork-Presbyterian Hospital’s Flexibility Benefits Program, which allows residents to choose from a variety of benefit plans covering healthcare, dental care, life insurance, and disability protection. The hospital provides professional liability coverage.
MEET OUR RESIDENTS

PGY-1

Marie Altendahl, MD
Rachel Herz-Roiphe, MD
Alma Lopez, MD
Julia Moyette, MD
India Perez-Urban, MD
Manasa Geeta Rao, MD

PGY-2

Marie Chase Anderson, MD
Michelle Darko, MD
Gabriela Frid, MD
Stephanie Guang, MD
Erin Silva, MD
Katherine Yoh, MD

PGY-3

Monica Allen, MD
Hooman Azad, MD
Nicole Cruz, MD
Taylor Jacob, MD
Anjali Jotwani, MD
Dib Sassine, MD

PGY-4

Margaret Bogardus MD
Helen Clark, MD
Alexandra Diggs, MD
Jordan Emont, MD
Amalia Gonzalez, MD
Natalia Parra, MD
CLINICAL CURRICULUM

First Year Clinical Rotations
The rotational assignments in the PGY-1 are designed to develop a strong foundation in the fundamental concepts of obstetrics and gynecology. Residents receive training in basic ultrasound techniques by spending time in our state-of-the-art obstetrics and gynecology ultrasound units during the REI/Ultrasound block. A rotation in primary and preventive ambulatory care provides residents with a firm clinical base on which to build their skills in patient care.

- Obstetrics
- Benign Gynecology
- Gynecologic Oncology
- Family Planning
- REI/Ultrasound
- Primary and Preventive Ambulatory Care
- NewYork-Presbyterian Allen Hospital
- Night float

Second Year Clinical Rotations
Residents in the PGY-2 are given increased clinical responsibilities and exercise a greater role in the management of patients on all services. Residents are able to solidify their understanding of the basic concepts in obstetrics and gynecology and participate in more advanced procedures.

- Obstetrics
- Benign Gynecology
- Gynecologic Oncology
- Family Planning
- REI/Ultrasound
- Maternal Fetal Medicine
- Night float

Third Year Clinical Rotations
PGY-3 affords residents the opportunity to concentrate on their mastery of surgical skills and the development of comprehensive management practices. Residents learn to serve as consultants to other specialties on the Ob/Gyn consult and clinic rotation and work closely with MFM fellows and faculty in the care of antepartum patients with complex obstetric problems. PGY-3 residents have an elective rotation, which they may use to pursue specialized clinical training or research, either in-house or at an outside institution.

- Minimally Invasive Gynecologic Surgery
- Obstetrics
- Benign Gynecology
- Maternal Fetal Medicine
- Ob/Gyn Consult and Clinic
- REI/Ultrasound
- Urogynecology/Pediatric and Adolescent Gynecology
- Elective
- Night float

Fourth Year Clinical Rotations
During the PGY-4, chief residents assume the responsibility of managing each service as they prepare to become independent practitioners. An integral part of their role is to supervise and teach junior residents and medical students. Chiefs also continue to expand their surgical repertoire as they complete advanced training in the gynecologic subspecialties, including oncology, reproductive endocrinology and infertility, urogynecology, and reconstructive pelvic surgery.

- Minimally Invasive Gynecologic Surgery
- Obstetrics
- Benign Gynecology
- Gynecologic Oncology
- REI/Ultrasound
- Urogynecology/Pediatric and Adolescent Gynecology
- Elective
- Night float
CONFERENCES AND DIDACTIC TEACHING

Thursday is our academic day in the Department of Obstetrics and Gynecology. The day begins with Morbidity and Mortality (M&M) conference, in which cases from each service are presented by members of the house staff and are followed by lively and thoughtful discussion from the faculty and other members of the department.

**Grand Rounds**
Weekly Grand Rounds follow the M&M conference and feature presentations from within our faculty, as well as many distinguished visiting guest speakers. Each second and fourth year resident is required to give one Grand Rounds presentation each year. These talks are often the highlight of the morning session.

**Resident Didactic Lecture Series**
The Resident Didactic Lecture Series supplements the experience gained on clinical rotations to round out the comprehensive post-graduate curriculum. Residents have protected time away from their clinical duties to attend this weekly lecture series following Grand Rounds. One Thursday of the month is a designated simulation session in the Simulation Center at the Vagelos Education Center.

**Fetal Heart Rate Tracing Rounds**
Fetal Heart Rate Tracing Rounds are conducted once a week on Labor & Delivery.

**Gynecology Conference**
A Gynecologic (TGIF) Conference takes place every Friday morning. Preoperative cases are discussed with supervising faculty, and often an ACOG practice bulletin or a review of the recent literature on a particular gynecologic topic will be presented by a resident.

**Prenatal Pediatrics Conference**
Complex high-risk pregnancies involving issues such as fetal anomalies, congenital heart defects, and genetic syndromes are discussed in a multidisciplinary setting with colleagues from Neonatology, Pediatric Surgery, Anesthesia, and other relevant specialties.

**Obstetrics Journal Club**
An OB Journal Club is held every month with the presentation of an interesting paper by a member of the house staff and a critical discussion and review of the topic led by an MFM fellow or faculty member.

**Continuity Clinics**
Ambulatory Continuity Clinics provide residents with the ability to care for their own panel of patients in a longitudinal fashion throughout their entire residency. Starting in the first year, residents are assigned one half-day session each week to develop their own “practice” of patients. Residents are supervised by attending physicians and learn how to provide comprehensive health care for women, including preventive medicine, family planning, and antenatal, postpartum, gynecologic, and geriatric care.
RESEARCH CURRICULUM

The research curriculum offers residents a conducive and supportive environment for scientific investigation, education, and scholarship under the supervision of a chosen mentor and training from our investigators. Residents are required to actively participate in at least one research project during residency training, becoming familiar with the development, execution, data analysis, interpretation, and presentation of a research project.

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<thead>
<tr>
<th>PGY-1</th>
<th>PGY-2</th>
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<tbody>
<tr>
<td>• Didactic lecture: “Introduction to Research at Columbia”</td>
<td>• Didactic curriculum: Lecture series “Principles and Concepts in Epidemiology and Biostatistics”</td>
</tr>
<tr>
<td>• Intro to Research: Residents must complete basic institutional on- line research training courses by the end of PGY-1 or sooner if active engagement of research is performed prior to this time.</td>
<td>• Mentor identification: Each resident year is assigned a mentor to ensure that residents are on track with the research curriculum. Your mentor will follow your research progress throughout your residency.</td>
</tr>
<tr>
<td>• Attendance at monthly Journal Club sessions</td>
<td>• Presentation of research hypothesis formally to Core Group</td>
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<thead>
<tr>
<th>PGY-3</th>
<th>PGY-4</th>
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<tbody>
<tr>
<td>• Research: Collect data, analyze results, and meet with mentor to assess progress.</td>
<td>• Presentation: Meet with mentor regularly to assess progress. Present findings at national conferences (e.g. ACOG, SMFM).</td>
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<tr>
<td>• Development of proposal (protocol) to solve the research question (conduct an appropriate literature search based on the research question; identify, consult, and collaborate with the appropriate content experts to conduct research; and propose a methodological approach to solve the question)</td>
<td>• Publication: Meet with mentor to assess progress. Write up and submit to a peer-reviewed journal by completion of PGY-4</td>
</tr>
<tr>
<td>• Presentation: Present results of the research at the annual Sloane Academic Assembly at completion of PGY-3.</td>
<td>• Attendance at monthly Journal Club sessions</td>
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<td>• Attendance at monthly Journal Club sessions</td>
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RESIDENT RESEARCH

The Department of Obstetrics and Gynecology is committed to providing a clinical, basic science, and technology-based research environment in women’s health. Our residents are required to be familiar with the development, execution, data analysis, interpretation, and presentation of a research project by active participation in at least one research project during residency training, to understand the basic principles of basic and applied clinical research, and to be able to critically appraise and summarize the literature on a subject and judge whether a research project or publication is sound, ethical, unbiased, and clinically valuable.

Recent Published Resident Research

Jordan Emont

*Trends in Hysterectomy Rates Associated With the Coronavirus Disease 2019 (COVID-19) Pandemic*
Emont Jordan, Wen Timothy, Friedman Alexander M., Wright Jason D.

*Deliveries Among Patients With Maternal Hepatitis C Virus Infection in the United States, 2000-2019*
Arditi Britttany, Emont Jordan, Friedman Alexander M., D’Alton Mary E., Wen Timothy

Alexandra Diggs

*Utilization and outcomes of adjuvant therapy for stage II and III uterine leiomyosarcoma.*
Diggs Alexandra, Sia Tiffany Y., Huang Yongmei, Gockley Allison, Melamed Alexander, Khoury-Collado Fady, St Clair Caryn, Hou June Y., Hershman Dawn L., Wright Jason D.

Sloane Academic Assembly Research Publications

- *Maternal morbidity and obstetric complications during deliveries with prior uterine surgery*
  **Presenter:** Margaret Bogardus, MD
  **Preceptor:** Alexander Friedman, MD, MPH

- *Long-term Cancer and Non-Cancer Associated Mortality Among Patients with Cervical Cancer*
  **Presenter:** Helen Clark, MD
  **Preceptors:** Jason Wright, MD

- *Patterns of use of primary chemotherapy and first-line chemotherapy for recurrence among patients with cervical cancer*
  **Presenter:** Alexandra Diggs, MD
  **Preceptors:** Jason Wright, MD

- *Pregnancy outcomes in women with elevated and stage I blood pressures after 20 weeks gestation*
  **Presenter:** Natalia Parra, MD
  **Preceptor:** Whitney Booker, MD
Living in New York

Columbia University Irving Medical Center is located in Washington Heights, a family-oriented neighborhood in northern Manhattan that is steeped in history. The hospital is easily accessible by several subway lines and is half a mile from the George Washington Bridge. New Jersey suburban communities, as well as Westchester and Riverdale in New York are within 15 to 30 minutes away.

Duty Hours

It is our policy to comply with New York State 405 Regulations and with ACGME policy on work hours for post-graduate trainees. A duty hour work week is defined as a maximum of 80 hours averaged over four weeks, inclusive of all in-house activities and clinical assignments.

Monthly Resident Well-Being Sessions

The PGY-3 Medical Education Council focuses on different aspects of the resident curriculum. One of our residents on the committee focuses on resident well-being. We have implemented new well-being sessions for our residents in the past year, including a “Broadway Bodies” dance class and a painting session. Over the holidays, we also dedicated a well-being session to performing a charitable act, making baby blankets for Project Linus, which provides them to nurseries in children’s hospitals across the area.

Annual Resident Retreat

One of the most anticipated days of the residency program is our annual Resident Retreat. The morning starts off with an in-depth exploration of an education topic. Our past topics include: Breaking Bad News, The Business of Medicine, Residents-as-Teachers, and the United States Health Care System. The afternoon is devoted to a fun, interactive team-building activity. Our past activities include a scavenger hunt at the Metropolitan Museum of Art, a culinary challenge, games at Chelsea Piers, and a scavenger hunt at Grand Central Station.

Sloane Olympics

The Sloane Olympics are a residency-wide, end-of-year OSAT/OSCE to assess performance. Residents rotate through stations that cover a range of topics in Ob/Gyn, incorporate the use of high and low fidelity simulators and standardized patients, and are aligned with the PGY-specific educational objectives for all rotations.
Global Health Elective

We have joined forces with the Baylor College of Medicine Global Women’s Health Program. The program is based at Kamuzu Central Hospital, a 619-bed hospital in Lilongwe, Malawi that serves as the regional referral center for central Malawi. This elective rotation provides residents the chance to share knowledge and experiences with physicians working under the constraints of low resource settings to treat women with conditions not commonly seen in the U.S. The experience is meant to foster global exchange, build capacity, and enrich the educational experience. Residents work under the direction of U.S.-trained board-certified faculty member. All visiting U.S. residents live at Baylor House, which is home to both short- and long-term students, residents, faculty members and researchers.

Artful OBservation

Artful OBservation is designed to celebrate the unique artistic excellence in visual arts, music, narrative medicine, and theater that is all around us in New York City. Medical Humanities, which provides the inspiration for Artful OBservation, is defined by the National Library of Medicine as the “intersection of medicine and humanistic disciplines such as philosophy, religion, literature, and the fine and performing arts.” We believe the arts provide an opportunity for physicians to engage in shared experiences, with the potential to increase wellbeing and decrease burnout among the larger community. We have improved physician well-being and community building within our own department through the Artful OBservation initiative. In 2023, the residents enjoyed a night on Broadway to see &Juliet.
WHY CHOOSE COLUMBIA?

Selecting your residency program is one of the most important decisions in your career in medicine. During your residency you’ll work side-by-side with 23 other bright, energetic physicians who are not only stellar clinicians but also extremely well-versed in the current literature of our field.

Why choose Columbia? We asked our current and former residents to share their stories.

I chose Columbia for myriad reasons, but I think the most important one -- and the one I repeatedly come back to -- is how supported and loved I feel by not only my fellow co-residents, but also by my fellows, attendings, nurses, medical assistants, and everyone else involved in patient care. It’s undoubtedly hard to be a resident. Being able to go to work and know that I will be supported by everyone on the care team makes Columbia a special place unto itself -- and a place I would choose again and again as my residency program.

Hooman Azad, PGY 3

I did an away rotation at Columbia as a fourth-year medical student, and from the moment I walked in the door, the culture of this program was apparent, and I knew I wanted to match here if I could. The residents were warm, smart, compassionate, and dedicated to their patients, and the faculty were clearly invested in trainees not only as learners but as people. It is obvious that everyone here loves what they do, and that they take pride in the care they provide to our patients. I truly believe there is no better place to train, and I feel so lucky to be part of the Columbia family.

Brittany Arditi, Alumna
LIFE AFTER RESIDENCY

2023
• MFM, Columbia
• Generalist, Private Practice
• REI, Columbia
• MFM, Yale
• Generalist, Private Practice
• MFM, Cornell

2022
• MFM, Einstein
• Gyn Onc, MD Anderson
• MFM, Columbia
• Generalist, Private Practice
• Generalist, Private Practice

2021
• MFM, Northwestern
• Gyn Onc, Memorial Sloan Kettering
• REI, Washington
• Gyn Onc, Memorial Sloan Kettering
• Generalist, Private Practice
• MFM, Columbia

It was apparent early on what a special residency program Columbia has. The diversity of resident interests, and the successful application of those interests to research and clinical work, made it clear that it is a place with both the resources and faculty/department investment to support residents’ career objectives—whatever they may be. The diversity and volume of patients that comes with working in a city like New York and a community like Washington Heights felt unique. It was clear the program cared about the community they worked with. The overwhelmingly kind welcome I received on matching left not a doubt that I had gotten very lucky to be taking my next step in medical training at Columbia.

Elizabeth Ludwig, Alumna

I chose Columbia because the training is unbeatably rich, the faculty are inspiring and supportive and the patient population encompasses people from all socioeconomic backgrounds being treated side by side equally.

Ben Margolis, Alumnus