UIC Open House
Department of Anesthesiology

Rena Beckerly MD, MBA
Program Director
Our Team

- Chairman: Dr. David Schwartz
- Associate Head of Education Dr. Heather Nixon
- Program Director: Dr. Rena Beckerly
- Associate Program Director: Dr. Jackie Galvan and Dr. Peggy Wheeler
- Chief Resident:
  - Dr. David Janiczeck
  - Dr. Jesse Morrison
  - Dr. Ronvir Sanga
UIC Education team

Dr. Heather Nixon
Associate Head of Education

Dr. Peggy Wheeler
Associate Program Director

Dr. Rena Beckerly
Program Director

Dr. Jackie Galvan
Associate Program Director
Chief Residents:
Dr. David Janiczek, Dr. Jesse Morrison, Dr. Ronvir Sangha
Overview Of Our Hospital

• State Hospital of Illinois
  • 462 bed Tertiary Care Hospital
  • 20 Main ORs
  • 2 OB suits
  • 4 IR suits
  • 2 Cardiac Suits
  • 4 GI suits
  • 21 Outpatient clinics

• Medicaid and Medicare
  • Care for the Vulnerable and Sick population

• Recognition:
  • Comprehensive Stroke Center
  • Level one Center for Excellence Bariatric Surgery Program
  • Blue Distinction Center:
    • Maternity care and Bariatric Surgery
  • Living Donor Transplantation
    • One of Best kidney/liver Tx in US
    • Most prominent for Hispanic recipients
Application Process

- Will your program have any supplemental applications after 10/21? Do you prefer to have a few sentences in our personal statement as to why we are specifically interested in your program? X2
- How to show interest in a program?
  - How to further show interest?
  - What is the recommendation for students not from the area to show interest?
- What will the selection process look like with virtual interviews? Will there be more or less interviews conducted?
- Is step 2 a requirement for interviews?
- How familiar is your program with couples matching? Thank you!
- IMGs:
  - Do you take IMGs?
  - Do you accept IMG in your resident programme
  - Is ECFMG certificate required for interview?
  - What is your attitude to CS exam and ECFMG-certificate delaying for IMG-applicant
Ideal Candidate

• *What does an ideal candidate look like here?*
  • Dedication to studying and training in Anesthesiology
    • Academic and clinical excellence in Anesthesia
    • Prioritize the four year academic experience
  • Team Player and displays adaptability
  • Reliable, professional, and has integrity
  • Teachable and can utilize all the expertise/resources of our department

*We are not a lifestyle program*  
*You will work hard and be well trained upon graduation*
Intern Year/Transition to CA1 year

• How is the transition from intern year to CA-1?
• How do you help residents transition from CBY to CA1 year?
A 4 year rich clinical experience
PGY-1
Clinical Base Year

**Foundation for Anesthesia**

- Emergency Medicine
- Surgery
- MICU
- Cardiology
- Anesthesia
- UIC – VA
- 2 M Orientation
- Medicine
## Sample Schedule

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<thead>
<tr>
<th>MONTH</th>
<th>INTERN</th>
<th>CA-1</th>
<th>CA-2</th>
<th>CA-3</th>
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<tbody>
<tr>
<td>July</td>
<td>UIC-Medicine</td>
<td>Main OR</td>
<td>Echocardiography</td>
<td>Mt. Sinai Trauma</td>
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<tr>
<td>August</td>
<td>UIC-Medicine</td>
<td>Main OR</td>
<td>Cardiac</td>
<td>Board Running</td>
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<tr>
<td>September</td>
<td>ED</td>
<td>Offsite Anesthesia</td>
<td>Liver Anesthesia</td>
<td>Northshore</td>
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<tr>
<td>October</td>
<td>MICU</td>
<td>Obstetrical Anesthesia</td>
<td>Loyola- OR</td>
<td>Global Health</td>
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<tr>
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<td>VA-Anesthesia</td>
<td>Medical ICU</td>
<td>Loyola- OR</td>
<td>Shriners-Peds</td>
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<td>VA-Anesthesia</td>
<td>PACU</td>
<td>MAIN OR</td>
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<tr>
<td>January</td>
<td>VA-Medicine</td>
<td>PRE-OP Clinic</td>
<td>Regional</td>
<td>VA</td>
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<td>VA-Medicine</td>
<td>Surgical ICU</td>
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<td>VA PAIN</td>
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**All interns are at UIC in June for orientation to prepare for CA1 year**

Orientation includes: Review of Basics of Anesthesia, Introduction to Quality Improvement (3 day course), Ultrasound, and Echocardiography
Subspecialties

• What is the extent of your exposure to Peds Anesthesia? What are specific strengths of your program with regard to Regional Anesthesia?

• Do residents interested in fellowships get the opportunity early in their training to explore the subspecialties?
Residents have the opportunity to express interest in different subspecialties throughout training. We prioritize these requests in making the rotation block assignments.

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CA-1 year
General & Sub-specialties
Our Philosophy

• Interns come in with four months of anesthesia training
  • Two months of intense orientation
• We start you on SUBSPECIALTIES EARLY to give you adequate exposure
• Call team covers most services at night so our residents see all types of cases on call throughout their training here
  • Peds cases >2yo
  • Neurosurgical cases
  • OB
  • Transplants
• Triad of Private Practice Success: Pediatrics, OB, Regional
CA-2 year
General & Sub-specialties
**Time for electives**

**Research rotation** (ABA allows up to 6 months)

**International Rotation** (HVV fellowship)
Vietnam, Beirut, Albania, India, Korea

**Specialty Rotation**

**QI rotation**
Systems Based Practice: Board Runner Rotation

**Mt. Sinai** (Trauma)

**Jesse Brown VA** (Thoracic/Regional)

**Shriners- Pediatric**
More complex cases with sicker pediatric patients
Larger Spine cases
More congenital anomalies
Run by our attendings

*Junior Attending, do pre-ops/staff CRNAs*
Structure of Residency

• *The types of cases at UIC including trauma, transplants, pediatrics and OB. Thank you!*
  • We are most known for our Transplant Services (Kidney, Liver, KP, intestine), Neurosurgical Services, Obstetrical Services, Bariatric Surgery, Pain Medicine.
  • Excellent divisions of Regional, Pediatrics, ICU
  • Draw on strengths of other institutions:
    • Cardiac: Loyola
    • Trauma: Mt. Sinai, considering University of Chicago
  • Average 55-60 hours per week (varies by rotation)

• *Is there competition for cases with other programs nearby?*
  • Every program has strengths/weaknesses
  • ACGME mandates a certain number of case exposures
Mentorship

• What type of mentorship is available in the program between residents?
• Is there an established mentorship program?
• What is the relationship like between residents and attendings?
• Are there any mentorship opportunities where a new resident can pair up with an older resident or a faculty member?
• What support networks are in place for residents?
Mentorship Teams

- 11 Attending Mentor Teams:
  - 1 Attending + 3-4 residents
    - One intern, one CA-1, one CA2, and one CA3
    - Each residents has a chance to learn from the more senior residents
    - As a senior, you help mentor the juniors
  - Meet at least twice a year individually and at least once as a team
  - Lower stakes relationship than department leadership- Strongly supported by the Program
  - Mentor receives all evaluations and test performance
  - If there is an issue, we will discuss with your mentor as well
  - You are assigned as an intern and then can change once you know our attendings better. We ask you for your top three preferences.

- Anyone in the Department can be your mentor in addition to your assigned mentor.
- Mentors help with case presentations, research endeavors, fellowship applications, Job opportunities.
Wellness

• What kind of services are provided for resident wellness?
• What feedback have you received from the current residents regarding wellness and the amount of protected study time?
• Situations surrounding COVID-19 and the current state of our nation overall (i.e. BLM) have been changing in unpredictable ways and leaving lasting effects; How has your program implemented new strategy/system(s) to support residents through these trying times?
WELLNESS- We Care About You/ We want you to succeed

Mentor Teams
- Network of support from peers and attendings
- There are 11 mentors- trained to help you succeed and develop a solid foundation
  - Specialized faculty development in mentorship
- Monitor your progress to keep you on track-
  - education goals, professional goals, and personal well being/goals
  - Metrics for your academic progress and we meet with you regularly to discuss your progress
- Help you reach the finish line and be SUCCESSFUL
  - Competent and Safe
  - Train you to be a leader and innovator in our field: We have all the resources at UIH

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<tr>
<th>Name:</th>
<th>Year in Training:</th>
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<tr>
<th>Conference attendance:</th>
<th>Opiate discrepancies:</th>
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<tr>
<td>Incomplete records:</td>
<td>Sick Calls:</td>
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<tr>
<td>Professionalism issues:</td>
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<tr>
<th>Rotations Completed this year:</th>
<th>Rotations for the rest of the year:</th>
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<tbody>
<tr>
<td>Exam Scores: AMT 0:</td>
<td>E: 6: BASICS</td>
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<td>ITE: CB:</td>
<td>CA-1: CA2: CA-3</td>
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<tr>
<th>Study routine:</th>
<th>Academic goals/Fellowship options:</th>
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<tbody>
<tr>
<td></td>
<td>Scholarly Activity: Case Reports, Articles, Presentations, MARC presentation</td>
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| Wellness/Role Models: | |
|-----------------------| |
WELLNESS- We Care About You/ We want you to succeed

- How do CARE about you – How does this play out in our day to day life in the department:
  - Work life integration – understanding that this is finite time of residency but will impact how you approach work for the rest of your life
    - Priority given to those residents who stay late the following day when relief list is made by the board runner
    - Average of one weekend off a month, up to two weekends. Request driven (plenty of study time).
    - Holiday call coverage is compensated with a “compensated holiday” vacation day.
    - Balancing rotations throughout the year
  - Transparent and shared call logs
  - Nightly dinners and meals provided on weekends/holidays:
    - During Covid - donated individual meals - specifically solicited by department members with contacts in food industry
    - Always have food in the department (cereal, PBJ, breakfast bars, coffee)
- Routine town halls with Dr. Rothschild and Dr. Aduitori without program leadership – Group outlet to discuss any/all life problems including any related to residency
- Monthly resident meeting with the Chief Residents
- Residents Ongoing Physical and Mental Health Care Needs:
  - Recurring appointments: We work with the residents to accommodate and support their healthcare needs.
  - We ensure that residents can attend their physician/healthcare appointments.
- GME: employee assistance program:
  - Encourage residents to meet with Geri Biamonte – Director of Employee Assistance – confidential and protected time by the department
Education on Health Disparities

• Institutional/Hospital wide initiative to address health disparities

• As the State Hospital, we pride ourselves on caring for all patients of Illinois, especially the most sick and vulnerable.

• Department of Diversity and Inclusion created a new Committee to address health disparities and anti-racism.

• We encounter health disparities every day at UIC as the state hospital
  • Education and self-awareness on implicit bias and bias mitigation
  • Ensure greater access for all and improve the quality of care we provide

• Dr. Lee is doing research in this area, specifically with pediatric dental operating room cases.
Global Health Division

- Dr. Nicole Thompson: ASA committee on Global Health, Division Head for Global Health

- Opportunities
  - Lifebox – The GHO Committee in collaboration with the ASA Charitable Foundation supports Lifebox by raising awareness about the need for pulse oximeters, and by providing education, training, and follow up throughout Latin America.
  - The Society for Education in Anesthesia(SEA)/Health Volunteers Overseas(HVO) – sponsors a competitive fellowship program to send senior residents to HVO approved sites in developing countries to teach anesthesia to trainees.
  - American Society of Anesthesiologist Global Humanitarian Outreach (GHO) Resident International Anesthesia Scholarship Program provides support for U.S. anesthesiology residents to spend a month in a resource-poor setting.
  - Overseas Training Program (OTP) in collaboration with the Canadian Anesthesiologists Society International Education Foundation (CASIEF)
  - Collaboration with Stanford’s Global Health Division’s International Education Program
  - Collaboration with Vanderbilt’s Global Health Division’s Simulation Curriculum

- Educational Topics
  - Global anesthesiology needs, workforce deficiencies, and outcome disparities.
  - What can we learn from our international colleagues in middle and low resourced countries?
  - Exploring cultural sensitivity and cultural competency.
  - Ethics and professionalism during international rotations
  - Global opportunities to address workforce deficiencies
  - Reviewing best practice guidelines for training experiences in global health
  - Simulation-based Global Health preparation
  - Global Health opportunities in the time of Covid-19
  - Understanding the determinants of health and the power of advocacy
  - UIC Center for Global Health Program – track selection
  - Department of Anesthesiology Resident Global Health Education – track selection
Our Department Strongly Supports Global Health

• Many of residents site this experience as one of the most influential in their training:
  • Thailand, Ghana, Rwanda, Vietnam, Beirut
• 2019: Sponsored 6 of our residents
  • SEA sponsored 9 nationally
  • Have to be in good academic standing
What makes our program unique? X3

• Clinical Experience:
  • Our patients are sick/ non-compliant and not always optimized for surgery.
  • You will see intra-operative complications routinely during your training and learn how to manage them

• Educators:
  • Minimal Attending turnover
  • Teachers have been here forever and have been taking care of the sickest patients in Chicago

• Life-long Mentorship:
  • We have SEVERAL attendings with national presence in our department:
    • Help with obtaining fellowships/jobs/applying for grants/career advice

• Innovation:
  • Career Development for Seniors with DJ

• Culture
  • We all work hard but love coming to work everyday. We like each other.

• What are aspects of the program that you are most proud of?
  • Our residents and their accomplishments:
    • Recognized at national meetings, repeated win top three awards at MARC
    • Fellowship Match List, obtain desired employment opportunities
    • Our residents are well trained and confident upon graduation:
      • Competent/Safe Anesthesiologists

As long as you put in the work, we will help you achieve your goals.
• **What do you feel are the strongest aspects of your program?**
  • Case load, teachers, patient population, mentorship, leadership support

• **What would you describe the focus of this residency program to be?**
  • At minimum: Primary focus is training a competent and safe anesthesiologist
  • Train you to be a leader, innovator in our field. We try to expose you to as many aspects of our department/expertise as possible

• **What would you say is the greatest strength and weakness of your residency program?**
  • Strength- Clinical experience
  • Weakness- Ultrasound training- Currently in development
Why are we DIFFERENT?

As long as you put in the work, we will help you achieve your goals
Find Your Direction
Relationship with other services

- I know this might be challenging, but can you provide some insight to what the working/social relationships are like between the anesthesiology department and other departments?
- How is the relationship between surgeons and anesthesiologists?
- How would you described the relationship between faculty and residents? Is it collegial or very formal?
UIC is a unique place

• Many attending Surgeons and Anesthesiologists are lifers here
  • Very cordial and amicable relationship
  • We have a tremendous amount of respect within the institution
  • Dr. Schwartz is a primary advisor to the Board of Trustees of ENTIRE UIH system spanning the entire state.
  • We were recognized by Craine’s for our Covid Response
  • We helped the ED/ICU with any aspect of the pandemic

• Relationship between Faculty and Residents is very positive
  • Eat together in swamp on call
  • In 3-4 years, you will be our colleagues. We treat you that way.
Didactics

• Structure of intern year - Structure of Call CA - 1 year - Resident didactic/teaching structure

• In what ways do you feel the program adequately prepares residents to do well on their ITEs?

• Is there much POCUS integrated into the curriculum?
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<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
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<td>Fundamentals of Cardio Anesthesia</td>
<td>Field Cases - Resident Meeting</td>
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<td>Faculty Meeting - Schneebeek</td>
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<td>MAM</td>
<td>TSE: Anesthesia Simulation - Beckman</td>
<td>Physiologic Effects of Cardiopulmonary Bypass - Window</td>
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Exam timeline

- **Intern year**
  - AKT₀
  - ABA BASIC

- **CA-1 year**
  - AKT₁
  - ITE_feb

- **CA-2 year**
  - ITE_feb

- **CA-3 year**
  - ITE_feb
  - ABA WRITTEN
Resources and Financial Support
The Basic Certification Exam

At the end of the CA-1 year
Basic knowledge of pharmacology & physiology
Physics of equipment, statistics, & pathophysiology
Not clinically based

How we prepare you for the exam
Basics Tutorial Curriculum
Daily from February to May

Resources
American Physicians Institute video and outline
TruLearn®

AKT-0, AKT-1, AKT-6
Tailored study plans, starting in intern year
Loren Educational Services
Follow metrics and intervene
ABA Written

At the end of the CA-3 year
Clinically Based

How we prepare you for the exam
ITE review
IT score- we meet with you regularly to discuss your progress and tailor a study plan to your needs
Loren Educational Services
Resident tutors
Faculty mentor/tutor

ABA Advanced (Oral Boards)

After graduation
Clinically Based

How we prepare you for the exam
Two oral board examiners
Morning Sessions- Senior residents

OSCE
Developing a program
The ABA Boards

Our Performance

2017: 15/15 (100%)
2016: 15/19 (79%) vs. 83% nationally
2015: 14/14 (100%)
2014: 16/16 (100%)
2013: 15/16 (94%) vs. 87% nationally
Fellowship/Employment

• Where are most of your graduates located, and what type of practices are they going to from residency?
• What percentage or residents do fellowship after residency?
• What training is there to learn how to practice anesthesiology outside of the operating room? Is there training in managing CRNAs and anesthesia care teams?
Fellowships 2020
Match Results

University of Michigan- Pain Medicine Fellowship
Yusef Aref MD

Washington University- Pediatric Fellowship
Cy Chavez MD

University of Illinois - Pain Medicine Fellowship
Hiram Isaac MD, David Esparaz MD

Massachusetts General Hospital- OB Fellowship
Ryan Militana MD

New York University- Pain Medicine Fellowship
Mahniya Sadiq MD

New York University- Cardiac Anesthesia
Tim Nanegrungsunk MD

Brigham and Women’s Hospital- OB Fellowship
Mike Williams MD

University of Illinois- Neuro- Anesthesia Fellowship
Evelyn Yeh MD
Fellowships 2019
Match Results

Cedars Sinai Regional Anesthesia Fellowship
Samir Bhakta MD

Mayo Clinic Intensive Care Fellowship
Diego Chauvet MD

University of Illinois- Pain Medicine Fellowship
Rohit Choudhary MD, Vamshi Yelavarthi MD

Massachusetts General Hospital Obstetrical Anesthesia Fellowship
Erin Haggerty MD

Emory University - Pain Medicine Fellowship
Ayesha Jain MD

New York University - Pain Medicine Fellowship
Grant Jameson MD, Mital Patel MD

Loyola University - Pain Medicine Fellowship
Nanhandi Marupudi MD

Johns Hopkins University - Pain Medicine Fellowship
Jarna Shah MD
Fellowships 2021
Match Results

University of California Irvine - Regional Anesthesia Fellowship
  Michael Perez MD

University of California Los Angeles - Pediatric Anesthesia Fellowship
  David Betancourth MD

University of Illinois - Pain Medicine Fellowship
  Morgan Welch DO

Johns Hopkins University - Critical Care Medicine Fellowship
  Jesse Morrison MD

Oschner Health - Cardiac Anesthesia Fellowship
  David Janiczek MD

University - Cardiac Anesthesia Fellowship
  Ronvir Sangha MD

University of Florida - Pain Medicine Fellowship
  Nikhil Makhija DO
Previous Fellowships

**Cardiac**
*Duke, Mayo Clinic, Northwestern University, University of Washington, Vanderbilt*

**ICU**
*Cedar Sinai LA, Mayo Clinic*

**Obsterics**
*Northwestern, MGM, Vanderbilt*

**Pediatrics**
*Cincinnati Children’s, Cleveland Clinic Children’s, Lurie Children’s, Riley Children’s*

**Non Traditional**
*Mount Sinai*

**Pain**
*Mount Sinai NYC, St Luke’s NYC, U of Miami, U of Washington, U of Pittsburgh, UIC*

**Regional**
*Cedar Sinai LA*
Resident Life

• How close-knit are the residents with the staff?
• How diverse your residents? Do they come from different places and backgrounds? What do residents do outside of the hospital? Do the residents hang out with one another? What is the relationship between residents and CRNAs/AAs if you have them? Thank you!
• I would love to meet the residents/PD and get to know more about your program.
• What does a day in the life of a resident look like?
Feedback

• How often is feedback given to residents
  • Mid-rotation and end of the rotations in person and in writing
  • Residents evaluate attendings monthly

• How do residents receive feedback?

• How are residents evaluated by the attending physicians, and how much interaction do they have with them?
Future
YOUR goals are OUR goals

As long as you put in the work, we will help you achieve your goals
We wish you the best of luck in your search