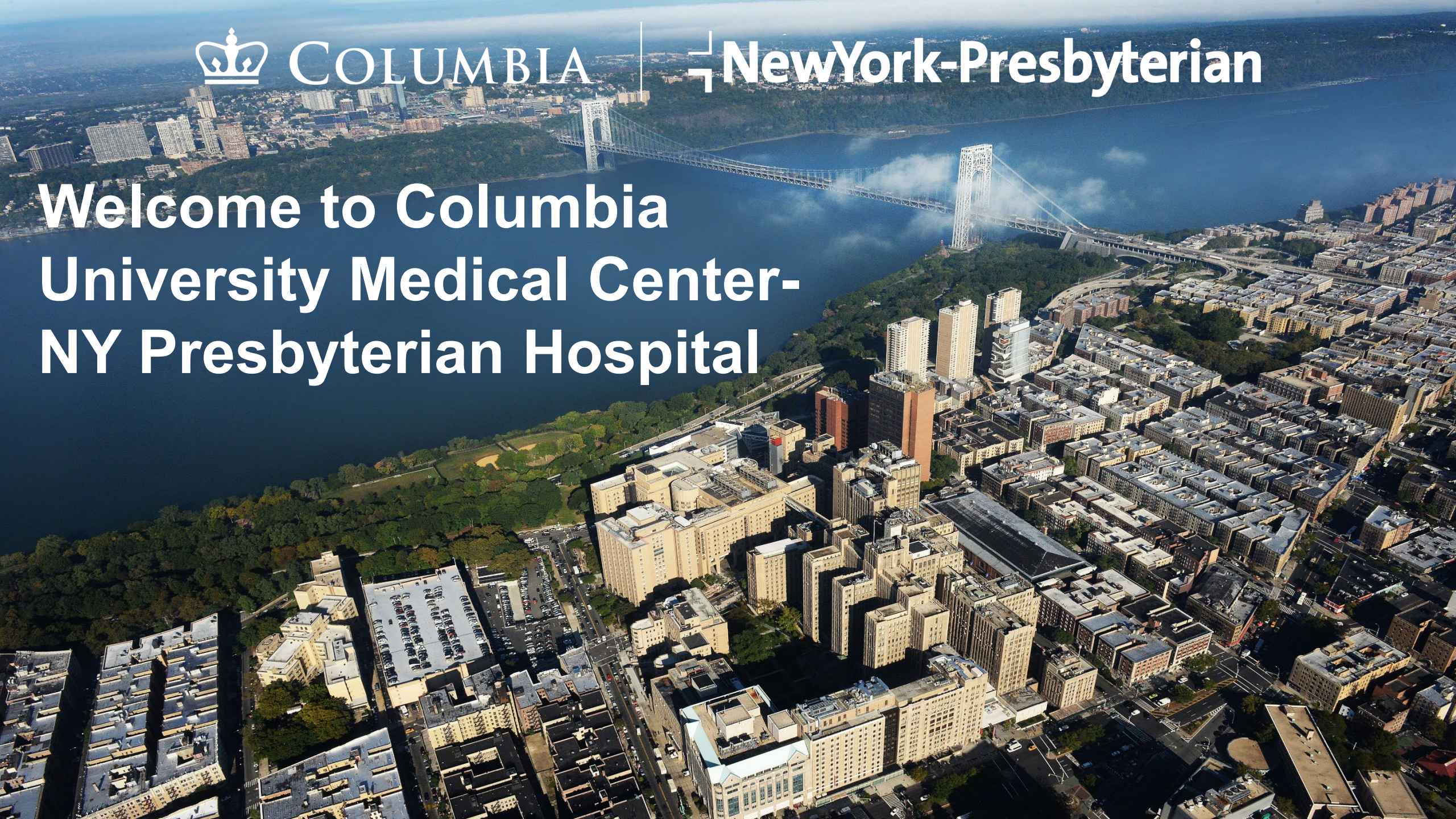




COLUMBIA

NewYork-Presbyterian

Welcome to Columbia University Medical Center- NY Presbyterian Hospital



Columbia Rheumatology Fellowship

The Division of Rheumatology of Columbia University College of Physicians & Surgeons offers a two-year ACGME approved fellowship program that provides comprehensive training in clinical and investigative rheumatology and related areas of basic science research.

Third and fourth years of research training are available through an NIH T32 grant mechanism for qualified fellows who seek academic research careers.

We aim to produce physicians who:

- 1) are clinically competent rheumatologists,
- 2) are capable of working in a variety of settings,
- 3) possess habits of lifelong learning that enable them to build upon their knowledge, skills, and professionalism,
- 4) are capable of teaching the principles of clinical rheumatology to primary care physicians and medical house officers, and
- 5) have the option to acquire a clinical or basic investigative experience in preparation for a career in independent scientific research

The fellows are an essential part of the division and our faculty are committed to training the academic leaders of tomorrow. These Columbia-trained leaders in rheumatology will play an essential role in bringing new ideas, energy, and perspective to a specialty whose importance will only increase as the population ages.

Columbia Rheumatology Fellowship

The goals of the first-year curriculum are:

- To teach how to diagnose, treat, and manage patients with rheumatic disease.
- To teach the trainee the role of the consultant and how to effectively consult.
- To teach basic immunology and concepts for understanding the pathophysiology of autoimmune diseases in general and rheumatologic diseases in particular.
- To teach basic principles for the treatment of these diseases.
- To expose the trainee to current research in autoimmunity and rheumatology through journal clubs and grand rounds.
- To learn the fundamentals of orthopedic approach to musculoskeletal disease.
- To further our trainees' education in quality assurance, cost containment and ethics.
- Be prepared for in-training exam in Spring
- In end of 1st year, formulate and have preliminary research data for your 2nd year research project with goal of submitting an ACR abstract with research mentor

Columbia Rheumatology Fellowship

The goals of the second year are:

- To further the education of the trainee relevant to the diagnosis of and care and treatment of patients with rheumatic diseases.
- To further expose the trainee to current research in treatment, diagnosis, and etiology of autoimmune and rheumatologic diseases. This is accomplished through the fellow's direct involvement in a research project in addition to continued involvement in selected patient care activities including rheumatology clinics.
- Fellows in the second years are encouraged to participate in laboratory or clinical research; opportunities for research are detailed in the Research section of our website.
- **Electives: Pediatric Rheumatology, EMG, Dermatology, Uveitis clinic, Scleroderma clinic, Osteoporosis clinic, Physical Therapy, Rehab Clinic**
- **Be prepared for in-training exam in Spring**
- **In end of 2nd year, have ACR abstract and preparing publication**

For fellows that have a strong interest in developing a career in research, they may elect to do a third year.

Inflammatory Arthritis Faculty



Dr. Joan Bathon



Dr. Elizabeth Park



Dr. Maria Salgado

General Rheumatology Faculty



General Rheum Faculty:

Dr. Jane Kang

Dr. Ralph Blume

Dr. Katherine Nickerson

Dr. Christine Parsons

Dr. Jason Liebowitz

Dr. Despoina Michailidou



Lupus Faculty



Lupus Faculty:

Dr. Anca Askanase

Dr. Laura Geraldino

Dr. Jenny Gartshteyn (Myositis)

Dr. Nancyanne Schmidt

Lupus Nurse Practitioner:

Leila Khalili, NP



Various Specializations



Dr. Lisa Imundo
Dr. Elana Bernstein
Dr. Yiming Luo
Dr. Adam Mor
Dr. Teja Kapoor

Pediatric and Adolescent Rheum
Systemic Sclerosis
Genetics and Systemic Sclerosis
Immunotherapy
Sjogren's Disease

Immunology Faculty



Dr. Adam Mor



Dr. Bob Winchester



Dr. Jenny Gartshteyn

Bronx VA Attendings



Dr. Elana Bernstein



Dr. Bob Winchester



Dr. Elizabeth Park

Adjunct Faculty



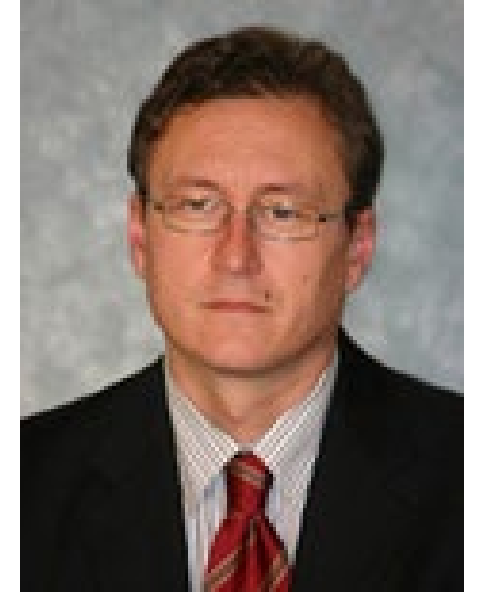
Dr. Allison Beitler



Dr. Alex Kimel



Dr. Neil Gonter



Dr. Dimitrios Pappas

Eastchester NY

Teaneck, NJ (Osteoporosis elective)

Teaneck, NJ

Athens, Greece

Rotations

	MILSTEIN-A	ALLEN	MILSTEIN-B	VA
July	Chunhui Chen	Navya George	Julie Urgiles	Martin John
August	Martin John	Chunhui Chen	Navya George	Julie Urgiles
September	Julie Urgiles	Martin John	Chunhui Chen	Navya George
October	Navya George	Julie Urgiles	Martin John	Chunhui Chen
November	Chunhui Chen	Navya George	Julie Urgiles	Martin John
December	Martin John	Chunhui Chen	Navya George	Julie Urgiles
January	Julie Urgiles	Martin John	Chunhui Chen	Navya George
February	Navya George	Julie Urgiles	Martin John	Chunhui Chen
March	Chunhui Chen	Navya George	Julie Urgiles	Martin John
April	Martin John	Chunhui Chen	Navya George	Julie Urgiles
May	Julie Urgiles	Martin John	Chunhui Chen	Navya George
June	Navya George	Julie Urgiles	Martin John	Chunhui Chen

Weekly Schedule | Milstein and Allen Rotations

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8AM			Pre-Clinical Lupus Conference	Immunology Conference	ILD Conference (monthly)
9AM		Gen. Rheum Clinic (8:30am)	Lupus Clinic (8:30am)		Grand Rounds
10AM		Gen. Rheum Clinic	Lupus Clinic		Journal Club
11AM		Gen. Rheum Clinic	Lupus Clinic		Research Conference/MSK US
12PM		Gen. Rheum Clinic	Lupus Clinic		
1PM				Gen. Rheum Clinic	
2PM				Gen. Rheum Clinic	Sarcoidosis Conference (monthly)
3PM	Blume Rounds/ Meet the Professor			Gen. Rheum Clinic	
4PM	(Board Review once per month)			Gen. Rheum Clinic	

Weekly Schedule | Bronx VA Rotation

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8AM			Pre-Clinical Lupus Conference (via Zoom)		ILD Conference (once a month)
9AM	Clinic with Dr. Elana Bernstein			Clinic with Dr. Liz Park	Grand Rounds
10AM	Clinic with Dr. Elana Bernstein			Clinic with Dr. Liz Park	Journal Club
11AM	Clinic with Dr. Elana Bernstein	Clinic with Dr. Bob Winchester		Clinic with Dr. Liz Park	Research Conference/MSK US
12PM	Clinic with Dr. Elana Bernstein	Clinic with Dr. Bob Winchester		Clinic with Dr. Liz Park	
1PM	Clinic with Dr. Elana Bernstein	Clinic with Dr. Bob Winchester			
2PM	Clinic with Dr. Elana Bernstein	Clinic with Dr. Bob Winchester			Sarcoidosis Conference
3PM	Blume Rounds/ Meet the Professor	Clinic with Dr. Bob Winchester			
4PM	Board Review (once a month)	Clinic with Dr. Bob Winchester			

Fellows On-Call Schedule

- On-call is taken 1 week at a time from outside the hospital.
- Call starts Monday 5pm until following Monday 8am (weekend included)
- Rounding on Milstein and Allen on weekends.
- VA covered by Dr. Liz Park

FIRST YEAR FELLOWS	ON-CALL REQUIREMENT	TOTAL ON-CALL WEEKS
Navya George	8 call weeks (2 holidays-NYE + Election Day+ transition week)	
Julie Urgiles	8 call weeks (2 holidays- Christmas + Juneteenth)	
Martin John	8 call weeks (1 holiday-thanksgiving + ACR+ transition week)	
Chunhui Chen	8 call weeks (2 holidays-MLK + President's)	
SECOND YEAR FELLOWS	ON-CALL REQUIREMENT	TOTAL ON-CALL WEEKS
Karen Gambina	7 call weeks (1 holiday)	
Caroline Atlas	7 call weeks (1 holiday)	
Giovanna Rosas Chavez	7 call weeks (1 holiday)	

Fellows On-Call Schedule

The fellow is expected to come into the hospital for all emergency-related requests for evaluation. Although the fellow is expected to use his/her own judgment as to what is an emergency call, general guidelines are stipulated below.

Fellows should come into the hospital if:

1. An arthrocentesis is required.
2. The patient has rheumatic symptoms and a fever.
3. The patient has a severe flare of SLE or severe rheumatic disease
4. A clinical decision regarding medication dosing is required (e.g., the need for steroid therapy).
5. There is an unexplained deterioration in the patient's condition.
6. The patient has an undiagnosed systemic illness.
7. A specific request is made by housestaff or attending staff for any reason.

Fellows should call the rheumatology attending-of-record for consultation as often as needed.

In July, August, and September it is expected that the fellow will speak with the attending on a daily basis. The attending should be called for any new hospital admission for the purpose of reviewing evaluation and management decisions.

Rheumatology Faculty Attending Schedule

- Fellows do 4-week blocks (usually no weekends when on Milstein)
- Attendings do 2-week blocks on Milstein and Allen, but including weekends

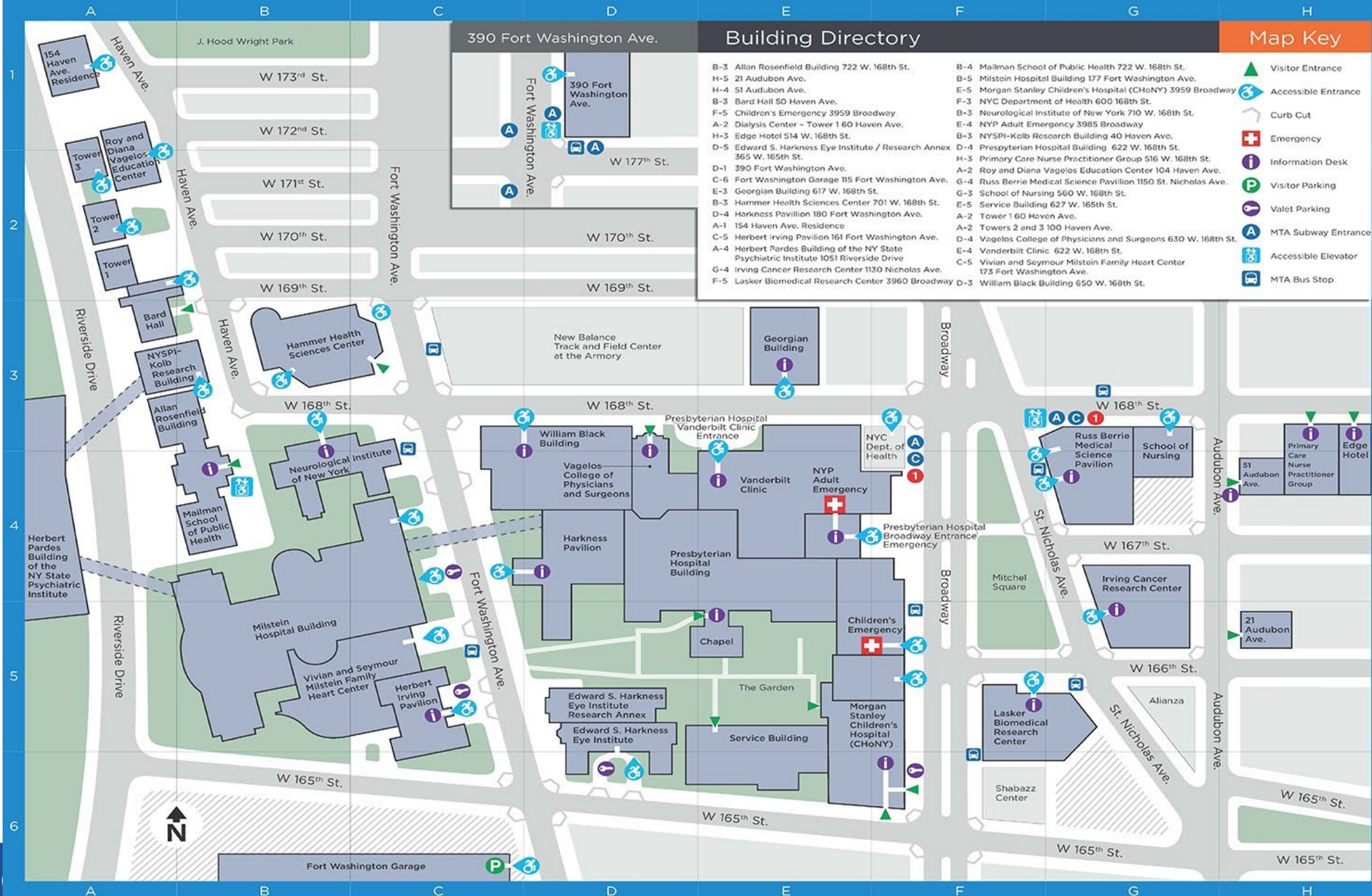
2025-2026 Faculty Schedule					
2025					
Month	Milstein Rheum Attending	Allen Rheum Attending	Internal Med Service	Allen Gen Med Service	COMMENTS/SWITCHES
07/01/25-7/15/25	Kapoor	Schmidt	Salgado 7/10-7/24	Schmidt ALLEN GEN MED 06/26-07/09	
07/16/25-07/31/25	Liebowitz	Kapoor			
08/01/25-08/15/25	Salgado	Geraldino			
08/16/25-08/31/25	Askanase	Askanase			
09/01/25-09/15/25	Schmidt	Liebowitz	Kang (2wk) / Kapoor (2wk) 9/4-10/1		9/11/2025 Bernstein/ALLEN
09/16/25-09/30/25	Mor	Kapoor			
10/01/25-10/15/25	Luo	Luo			
10/16/25-10/31/25	Gartshteyn (10/16-22); Park (10/23-31)	Gartshteyn/Park			
11/01/25-11/15/25	Bernstein	Bernstein			
11/16/25-11/30/25	Michailidou	Kang	Liebowitz 11/27-12/11		
12/01/25-12/15/25	Nickerson	Bernstein			
12/16/25-12/31/25	Pappas	Pappas			
2026					
01/01/26-01/15/26	Bathon	Bathon			
01/16/26-01/31/26	Kimel	Kang	Salgado 1/22-2/5		
02/01/26-02/14/26	Geraldino	Geraldino			
02/15/26-02/28/26	Parsons	Schmidt	Liebowitz (2wk) / Kang (2wk) 2/19-3/18		
03/01/26-03/15/26	Gartshteyn	Gartshteyn			
03/16/26-03/31/26	Luo	Bathon	Schmidt (2wk) / Luo (2wk) 3/19-4/15		
04/01/26-04/15/26	Kang	Michailidou			
04/16/26-04/30/26	Park	Salgado	Kapoor (2wk) / Luo(2wk) 4/16-5/13		
05/01/26-05/15/26	Askanase	Parsons			
05/16/26-05/31/26	Liebowitz	Salgado			
06/01/26-06/15/26	Gartshteyn	Gartshteyn			
06/16/26-06/30/26	Parsons	Michailidou			

Rheumatology Precepting Clinic Schedule

DIVISION OF RHEUMATOLOGY			
ARTHRITIS CLINIC SCHEDULE			
TUESDAY'S ARTHRITIS CLINIC 9:00AM-12:30PM			
DATES	ATTENDING	ATTENDING	CHANGES
July 2025			
7/1/2025	PARK	KAPOOR	
7/8/2025	PARK	KANG	
7/15/2025	PARK	MOR	
7/22/2025	PARK	NICKERSON	
7/29/2025	PARK	SALGADO	

DIVISION OF RHEUMATOLOGY			
ARTHRITIS CLINIC SCHEDULE			
WEDNESDAY'S LUPUS CLINIC 9AM - 12PM			
DATES	ATTENDING	ATTENDING	ALTERNATE ATTENDING
July-25			
7/2/2025	ASKANASE	GERALDINO	
7/9/2025	ASKANASE	GERALDINO	
7/16/2025	ASKANASE	GERALDINO	
7/23/2025	ASKANASE	GERALDINO	
7/30/2025	ASKANASE	GERALDINO	

DIVISION OF RHEUMATOLOGY			
ARTHRITIS CLINIC SCHEDULE			
THURSDAY'S GENERAL CLINIC 1PM - 5PM			
DATES	ATTENDING	ATTENDING	CHANGES
Jul-25			
7/3/2025	SCHMIDT	LUO	
7/10/2025	BERNSTEIN	GARTSHTEYN	
7/17/2025	LIEBOWITZ	LUO	
7/24/2025	BEITLER	LUO	
7/31/2025	PARSONS	GARTSHTEYN	



Rheumatology Consult Service

- There are 2 Milstein consult teams
 - You can consider alternating every other consult.
 - Try to have “sick patients” spread fairly amongst the two teams
 - If there is a disease you haven’t seen, work with your team member to take that consult
- All urgent consults should be seen within 4 hours.
- If a consult is called while the fellow is in afternoon clinic, the fellow should perform consultation after clinic unless an arrangement is made specifically with the fellow-on-call.
- Milstein-A and Milstein-B fellow will have alternating Thursday afternoon clinic sessions every other week such that one Milstein fellow is always available to perform consults.
 - When Milstein-A fellow has clinic, Milstein-B fellow will cover Milstein-A fellow’s consults.
 - When Milstein-B fellow has clinic, Milstein-A fellow will cover Milstein-B fellow’s consults.
- Non-urgent consult requests after 5:00 P.M. may be seen the following day.
- On Thursdays, there is an alternating schedule for Milstein fellow clinic.
- Milstein: averages 1-3 consults a day
- Allen: averages of 1 consult a week

Vacation Requests

- 4 weeks of paid vacation per year
- **Taken during Allen rotation month**
- Only one first year fellow may take vacation at one time, and vacation time must be taken during the Allen consult month.
- No vacation time is permitted while rotating at the Bronx VA. However, for urgent personal reasons, you can trigger sick call protocol even when on VA.
- A maximum of two fellows in total may be away at one time.
- Vacation requests must be submitted **at least 8 weeks** in advance and **approved by the Program Director. Must be submitted officially via MedHub. Please also email Jordan and Dr. Kapoor together when Medhub vacation requests are submitted.**
- Travel/vacation plans should NOT be made before vacation requests have been approved.
- Appropriate outpatient clinics must be cancelled accordingly. Once approved, email Rosa Castillo and Vialini Monegro and cc Dr. Kapoor and Jordan.
 - Verify with Jordan regarding coverage for Allen consults AND Inbasket Coverage during your week away.

Duty Hours

The scheduled work week will not exceed 80 hours per week. On-call is taken 1 week at a time by phone from outside the hospital. For our program this does not result in an excess of hours over the mandated 80 hours per week.

1) *Residents and fellows must have one 24 hour period off per week.*

- This requirement is built into each rotation schedule. We try to avoid weekend calls when on Milstein.

2) *Residents and fellows must have at least 10 hours off between shifts.*

3) *Residents and fellows cannot exceed 80 hours of work per week, averaged over 4 weeks.*

Work hours are monitored electronically by utilization of MedHub. Duty hours must be entered on a weekly basis in MedHub. The Division can be fined if Duty Hours and Duty Hours Surveys are not completed by the required deadlines.

Procedure Logs

- Joint aspirations are initially supervised by the attending until an appropriate level of skill is reached.
- Fellows are to keep a list of all procedures performed. Instruction on joint examination and injection techniques are given throughout the year.
 - We will review your ongoing list every 6 months.
 - You will need this for your future employment!
 - In the “Comments” section, write which joint and left/right side.

Expectations on Consult Service (Weekdays & Weekends)

- Come early: **Pre-round/see each patient** and **pre-chart** on your patients in the morning
- Literature search on your patients. Formulate your own independent assessment and plan. Think of yourself as the primary rheumatologist, take ownership (attendings are only supervising).
- Engage your students, residents, and team-members. Assign topics and patients to your team, while guiding them.
 - Take on active clinician educator role for your team.
- Be prepared during attending rounds. Arthrocentesis can be done with attending. Have your supplies, medications from nurse, and patient consent form prepared beforehand.
- Finalize your note after rounds, include procedure note if arthrocentesis is performed
- On Weekends, consider bringing new insights, re-evaluating the patient and if anything is missing with workup.

Expectations in Clinics

- **Helpful to pre-chart on your patients** with review of labs/imaging, a literature search on your patients (if needed) prior to clinic
- Be prepared before attending presentation. Formulate your own independent assessment and plan
- Arthrocentesis can be done with attending. Verbally consent your patient for arthrocentesis (no outpatient consent form).
- Finalize your note after patient encounter or end of clinic, include procedure paragraph if arthrocentesis is performed
- Follow up on your epic inbasket daily and answer clinic staff messages as soon as possible

Conferences by Fellows

Case Presentations (1 per fellow)

- One Case Presentation per fellow in August
- 20 minutes: Present a patient case
- 30 minutes: Provide background literature
- 10 minutes: Questions

Grand Rounds (1 per fellow)

- Give yourself 4-6+ weeks to prepare, Review topic/slides with attending prior to starting
- Pick a topic with literature data
- 5 minutes: CARE Question
- 10 minutes: Patient case with 3 Questions Grand Rounds will answer
- 30 minutes: In-depth literature with critical analysis. Answer each of the 3 Questions
- 10 minutes: Questions

Conferences by Fellows

Journal Club (1 per fellow)

- Give background literature for Journal article
- Present Journal article with your analysis of data/study

Quality Improvement/M&M Project (2 group presentations)

- Implementation of QI curriculum, led by Dr. Nancyanne Schmidt
- 2nd year fellows present as a group in December 2025 and March 2026
- 1st year fellows present as a group in January 2026 and May 2026

Mission of Fellowship

- Create a smooth transition from fellowship to attending
- Your Rheumatology Fellows clinic is a **real-live clinical practice**.
- Your patients are **YOUR patients**, not attendings' patients.
- All clinic resources are same as attendings (same office rooms, secretaries, MA's, prior authorization teams). Your epic inbaskets are the same as attendings. Billing is same as attendings.
- Your co-fellows are your colleagues. Just like attendings, colleagues cover each other during vacations, sick days, etc.
- Grand Rounds by fellows mirror Grand Rounds given by faculty attendings

Goals and Objectives of Inpatient Consultation rotation and Outpatient rotation: Months 1-6

Medical Knowledge:

1. Understand the differential diagnosis of inflammatory arthritis.
2. Understand the differential diagnosis of fever with arthritis.
3. Recognize rheumatologic emergencies and the complexities of patients ill with rheumatologic disease.
4. Understand the use of laboratory tests used in evaluation of rheumatologic diseases: RF, anti-CCP, ANA, ANA subsets, anti-DNA, ANCA, urinalysis, CPK, complement, cryoglobulins.
5. Understand the pharmacology and use of immunosuppressives, corticosteroids, narcotic analgesics and NSAIDs.

Goals and Objectives of Inpatient Consultation rotation and Outpatient rotation:

Months 1-6

Patient care:

1. Obtain a comprehensive history and physical examination and present to the attending in logical fashion. Differentiation between regional joint disorders and systemic diseases should be recognized. Exam elements for specific joints should include understanding findings of instability, deformity, inflammation, repair, proliferative synovitis and effusion. Similarly, spinal radicular distribution should be understood (e.g. EHL is supplied by L5).
2. Review all imaging studies to be able to present to the attending the positive and negative findings of the investigation.
3. Examine all synovial fluids obtained and be able to estimate WBC and differential and also begin to differentiate MSU and CPPD crystals (latter with polarized microscopy).
4. Demonstrate skill in aspiration/injection of shoulders and knees to point where could be independent in performing these.

Practice based learning and improvement:

1. Interact with the attending on rounds to discern why a particular course of action is taken.

Look up literature/other information to support treatment decisions.

2. Prepare for patient case conference by addressing (through the literature) particular clinical questions and problems encountered.

Goals and Objectives of Inpatient Consultation rotation and Outpatient rotation:
Months 1-6

Systems based learning:

1. Develop an understanding of how to function as a consultant to a great many different services in the hospital.
2. Learn how to effectively consult physical medicine/rehabilitation.
3. Determine cost-effectiveness of alternative proposed interventions.
4. Identify problems in delivery of optimal patient care and propose corrective actions.

Goals and Objectives of Inpatient Consultation rotation and Outpatient rotation:

Months 1-6

Interpersonal communication skills:

1. Demonstrate the ability to interact with patients in an empathic and understandable manner and to reliably and accurately communicate the patient's and their family's views and concerns to the attending.
2. Develop rapport with other members of the consult team as well as with services requesting consultation.
3. Write an effective consultation note – addressing both the requested information as well as pertinent discussion of other rheumatologic issues the patient may have.

Professionalism:

1. Be prompt for rounds; if time appointed for rounds does not allow sufficient time for information review, attempt to reschedule a later time.
2. Demonstrate the understanding of the importance of patient primacy, patient privacy, patient autonomy, informed consent, and equitable respect and care to all.
3. Demonstrate humanistic qualities in interactions with patients, staff and colleagues.
4. Demonstrate ethical behavior by reporting back to the team key clinical findings, by following through on clinical questions, laboratory testing and other patient care issues, and recognizing potential conflicts of interest.