DGIMCI IN THE ERA OF COVID
2020 ANNUAL UPDATE
I am immensely proud of what our Division, composed of 328 compensated and 428 affiliated faculty, has achieved during this past year. Battling COVID-19 challenged us in ways we never thought imaginable. Under the direction of DGIMCI leadership, hospitalists transformed into intensivists and ambulatory physicians into hospitalists as NYU Langone Health, NYC Health+Hospitals (H+H) Bellevue and the NY Harbor Healthcare System VA Medical Center coped with the surge of COVID-19 patients.

General internal medicine ambulatory care physicians from across our faculty group practices and affiliated practices made up over 30% of NYU Langone Health “COVID Army.” Many of our NYC H+H/Bellevue ambulatory care faculty cared for inpatients at Bellevue Hospital and in Brooklyn, Family Health Center physicians answered the call to join in the COVID Army. In anticipation of another COVID-19 wave, we continue to plan and assure that our diverse faculty is ready to step-up whenever the need arises. The flexibility that the Division showed during this crisis demonstrates our readiness to take advantage of opportunities that have emerged, including telemedicine for primary care, expanded health disparity research and a new, virtually engaged general internal medicine community.

In the time before COVID-19 and ongoing, our educators are designing innovative programs, our researchers are engaged in important scholarship and our community gathered to display our pride in being GIM.

This Annual Update shares some of our COVID-19 accomplishments and other achievements across our DGIMCI community.

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**PHILANTHROPY**

The Division of General Internal Medicine and Clinical Innovation is fortunate to receive philanthropic support. These donations afford the Division the opportunity to support our faculty development programs, and innovation projects. We gratefully acknowledge these and all our supporters:

- Ainslie Foundation
- Murray J. Berenson, MD
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- Loren Blackford and Michael Dubno
- Edward Chiu, MD
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- Loraine DiPaolo
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- Dr. Joyce Lowinson
- Patricia and Robert Martinsen Foundation
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- Lucy Tynish
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- Stanley and Judith Zabar
- S. Zlinkoff Fund for Medical Research

Generous supporters of:
- Murray J. Berenson, MD Innovation Grants in Patient Doctor Communication
- Anthony J. Grieco, MD Innovation Grants in Medical Education Research
- The Merrin Bedside Teaching Program

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Sondra Zabar
Professor of Medicine
Director, Division of General Internal Medicine and Clinical Innovation
NYU School of Medicine

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- Anthony J. Grieco, MD Innovation Grants in Medical Education Research
- The Merrin Bedside Teaching Program

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DC 12/11/2020
March 2020, the first wave of COVID-19 patients began to show up at NYU Langone Health. Recognizing the enormity of the crisis, DGIMCI leadership knew that a coordinated approach would be essential. Right away, Sondra Zabar, MD, Division Director, implemented weekly virtual meetings for site leaders across our NYU Langone Health institutions. Andrew Wallach, MD, Ann Garment, MD, and Verity Schaye, MD shared experiences from the Health + Hospitals perspective. Katherine Hochman, MD and Eric Goldberg, MD provided insight on front line strategies being implemented at the main campus of NYU Langone Health. Isaac Dakpins, MD and Charles Okamura, MD, detailed efforts in hard hit Brooklyn communities and Joseph Leung, MD brought the VA Hospital’s perspective.

Each week, leaders shared successes, challenges and failures that were encountered at their respective institutions. Together, they constructed new ideas and strategies and worked seamlessly together to build policies and responses during a rapidly changing environment. It was a marathon of selfless efforts, impressive collaboration and camaraderie.

The COVID Army – Boots (and PPE) on the Ground
As NYC became the epicenter of the COVID-19 pandemic, the NYU Langone Medicine Service had to grow from 8 teams to over 42 teams to accommodate the surge in patients urgently needing care. This expansion would not have been possible without the large number of DGIMCI faculty who have been working in outpatient settings for decades volunteering to serve as acting hospitalists and team leaders. “It’s a massive redepolyment of man- and woman-power,” according to Katherine Hochman, MD. “It really shows how people are willing to serve, and how much they want to make a difference.”

Kevin Hauck, MD, Assistant Director of Hospitalist Medicine Education, was instrumental in orienting, training and scheduling the over 800 attendings, residents, Physician Assistants, and Nurse Practitioners from different specialties as we ramped up clinical teams. Christopher A. Sonne, MD, Tisch hospitalist, created short videos to help orient physicians from other disciplines to quickly get them up to speed.

Lawrence Adler
NYU Langone Ambulatory Care West Side

Anthony Accurso
Sunset Terrace & Sunset Park Family Health Centers at NYU Langone

Sailera Babaeva
NYU Langone Ambulatory Care West Side

Michelle Baltus
NYU Langone Huntington Medical Group

Paul Basch
CareMount Medical

Caren Behar
Joan H. Tisch Center for Women’s Health

Dominic Biney-Amissah
NYU Student Health

Eric Blacher
NYU Langone Huntington Medical Group

Saul Blecher
NYU Department of Population Health

Rebecca Boas
H+H/Bellevue Adult Primary Care Clinic

Michael Brabeck
H+H/Bellevue Physician (Retired)

Jeffrey Buckner
NYU Physician

Alexander Bryan
H+H/Gotham Health Gouverneur

Robert Chavez
Preston Robert Tisch Center for Men’s Health

Carmen Chiu
NYU Langone Ambulatory Care West Side

Samuel Cohen
Sunset Park Family Health Center at NYU Langone

Megan Collins
NYU Internal Medicine Associates

Linh Dinh
NYU Internal Medicine Associates

Jillian Dlugoz-Gerber
H+H/Bellevue Adult Primary Care Clinic

Jason Doolinsky
Preston Robert Tisch Center for Men’s Health

Jennifer Dong
H+H/Bellevue Adult Primary Care Clinic

John Emy
CareMount Medical

Laszlo Feher
NYU Physician

Joey Fernandez
NYU Student Health

Olga Filipova
Sunset Park Family Health Center at NYU Langone

Ophra Ginsburg
NYU Department of Population Health and Medical Oncology

Andrew Goldstein
H+H/Bellevue Adult Primary Care Clinic

Edward Greenway
CareMount Medical

Richard Greene
H+H/Bellevue Adult Primary Care Clinic

Barry Grossman
Joan H. and Preston Robert Tisch Center at Essex Crossing

Hillel Isseroff
Crown Medical PC.

Ina Itzkovitz
NYU Langone Ambulatory Care West Side

Boris Ivkov
NYU Langone East Side Medical and Cardiovascular Associates

Ramiro Jervis
Sunset Terrace & Sunset Park Family Health Centers at NYU Langone

Leon Jons
NYU Langone Brooklyn Medical Arts Pavilion

Jennifer Knihtinsky
H+H/Bellevue Adult Primary Care Clinic

Janine Knudsen
H+H/Bellevue Adult Primary Care Clinic

Sally Kwa
NYU Langone Ambulatory Care West Side

Phyllis Kwok
NYU Langone Medical Associates - Bronxville

Yinan Lan
H+H/Bellevue Adult Primary Care Clinic

Matthew Lane
NYU Langone Medical Associates - Washington Square

Amy Lau
NYU Internal Medicine Associates

Janine Lebofsky
H+H/Bellevue Adult Primary Care Clinic

Joshua Lee
NYU Department of Population Health

Anna Lef
NYU Langone Ambulatory Care West Side

Tammy Leopold
NYU Langone Ambulatory Care West Side

Daniel Lesky
Out of state volunteer

Elizabeth Lippitt
NYU Langone at Trinity

Petra Lukoschek
NYU Langone Ambulatory Care West Side

Devin Mann
NYU Internal Medicine Associates

John Martin
Park Ridge Family Health Center at NYU Langone

John McKnight
Preston Robert Tisch Center for Men’s Health

Jun Mitsumoto
NYU Student Health

Sarah Moore
H+H/Bellevue Adult Primary Care Clinic

Quang Nguyen
Family Physician Family Health Center at NYU Langone

Dellis Norwood-Galloway
NYU Langone Medical Associates - Bronxville

Gregory Pitaro
CareMount Medical

Joseph Ravenell
NYU Department of Population Health

Harry Saag
NYU Physician

Sapana Shah
H+H/Bellevue Adult Primary Care Clinic

Daniel Silverstein
NYU Physician

Kseniya Slobodyanyuk
NYU Langone at Trinity

Irene Swansonberg
H+H/Bellevue Adult Primary Care Clinic

Kumar Vasudevan
NYU Langone Health, Addiction Medicine Fellowship

Joseph Vetrano
Preston Robert Tisch Center for Men’s Health

Judy Weinstein
Joan H. and Preston Robert Tisch Center at Essex Crossing

Rachael Winchester-Hayes
Park Ridge Family Health Center at NYU Langone

Anna Yaqoub
NYU Internal Medicine Associates

Michael Yee
Preston Robert Tisch Center at Essex Crossing

Nina Yuan
NYU Department of Medicine

Andrew Goldstein
NYU Langone Health, Addiction Medicine Fellowship

Joey Fernandez
H+H/Bellevue Adult Primary Care Clinic

Kevin Hauck, MD
Assistant Director of Hospitalist Medicine Education

NYU’s Family Health Centers (FHC) at the Heart of Brooklyn’s Battle
From the very beginning, physicians from the FHC joined the fight against COVID-19. Planning and staffing the FHC Respiratory Screening Center at Augustana, physicians triaged, tested and cared for patients who were part of the FHC family. They worked closely with Hospital leadership to convert the Sunset Park Adult Medicine and Specialty clinics into much needed overflow space for the Emergency Department. These efforts kept the Emergency Department available for patients in critical need of emergency care.

FHC and hospital leaders created a process to seamlessly transition COVID-19 positive discharged patients for outpatient follow up care. This included admitted COVID-19 positive patients who were unable to follow up with their regular primary care providers because of the pandemic. The FHC health care professionals provided valuable care virtually to these vulnerable patients within 3 days after they were discharged home.

These generalists joined the COVID Army, stepping in to act as team leaders or to support the teams as Supplemental Attendings.

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INNOVATIONS ACROSS OUR INSTITUTIONS

DGIMCI faculty are innovators by nature and practice. As the pandemic hit, we were able to adapt quickly, going above and beyond all expectations during an ever-changing environment.

Keeping Family Connected
During the height of the COVID-19 pandemic, patients in the hospitals were unable to have visitors and care teams were stretched to unimaginable limits, with little to no time to reach out to family members. In an extraordinary display of teamwork and innovation, "NYU Family Connect" was created across our institutions. Teams of physicians not caring for COVID-19 patients, social workers, medical students, nurses and other hospital personnel joined together to train and deliver critical updates to families about their hospitalized loved ones. The Family Connect program created a unique opportunity for DGIMCI faculty to provide in the moment training for medical students in doctor-patient communication.

At Tisch Hospital and Kimmel Pavilion and NYU Langone Orthopedic Hospital, under the leadership of Katherine Hochman, MD Family Connect teams ensured excellent exchange of information by creating WebEx interdisciplinary rounds and refining roles to allow for families to FaceTime patients with on-site nurses. For NYU medical students, it created a model that built-in mentorship and teaching by superb attendings and coupled this with a real-world authentic patient experience.

151 physicians, 100 medical students, 51 registered nurses, and 43 NYU Langone Health staff provided over 13,600 well thought-out and well-informed conversations with anxious loved ones.

Spearheaded by Katia Sokoloff and Drs. Adam Goodman and Sheetal Desai-Oghra, the NYU Langone Hospital-Brooklyn Family Connect program quickly set up a program to: (1) ensure proactive daily updates for patient families; (2) establish a call center to handle incoming calls thereby alleviating the front-line workforce; and (3) engage the remote clinical workforce in active support of on-site teams through essential clinical documentation in the electronic medical record. As one program participant wrote, "we need to stay connected, this disease has the potential to ‘disconnect’ us but we are fighting back with unity."

Since the beginning of the Brooklyn program there have been 100 remote workforce participants, over 4,000 Family Update Notes documented, and over 5000 calls through the call center.

Christian Torres, MD led the effort at NYC H+H/Bellevue, along with a core group of four students – Tamara Kahan, Penina Krieger, Sarah Ricklan, and Lucelene Rodriguez Laureano – bringing together 20 medical students and volunteers in the Family Connect Program, making more than 250 calls to update patients’ loved ones during the height of the pandemic. These four NYU Grossman School of Medicine students created a guide explaining how to review a COVID-19 patient’s chart, as well as how to conduct and document these challenging but sincerely appreciated phone calls. More than 60 medicine attendings worked with the students, incorporating them into their rounds via WebEx, supervising the calls, and providing feedback on family communication.

Transitioning Overnight to Telemedicine
Almost overnight NYU Faculty Group Practices, Bellevue Adult Ambulatory Care Clinics, Gouverneur Healthcare Services, Family Health Centers (FHC) and other internal medicine ambulatory care sites launched extensive telemedicine programs. Not only were patients’ care needs being met, but satisfaction with telemedicine visits was overwhelmingly positive.

Faculty Group Practices Take Action
As soon as the city hit "pause," a number of DGIMCI physicians joined the Virtual Urgent Care team to help handle the enormous increase in the number of calls related to COVID-19, answering close to 300 televisits in the first 2 weeks in March. During this time, Eric Goldberg, MD, spearheaded NYU’s FGP monumental effort to begin telemedicine visits nearly overnight. A mandatory centralized training helped standardize practices and prepare physicians. On March 19, the FGP launched telemedicine visits and within one week, 90% of visits were via telemedicine. More than 77,500 virtual primary care visits were conducted through August. Telemedicine allows Faculty Group Practices to be more flexible and increase access to care. Future efforts include integrating medical assistants and staff to prepare patients for visits.

NYU Langone Brooklyn’s Family Health Centers Guide Patients through Telemedicine
Patients at the NYU FHC struggle with economic insecurity and social determinants of health which could potentially impact their ability to participate in a telemedicine program. Initially, patients were resistant to the telemedicine platform, but with guidance from its dedicated and compassionate staff by May, the FHC had conducted nearly 9000 virtual visits. Patients were able to learn how to engage with the video aspects of telemedicine and FHC leaders, Isaac Dakpins, MD and Ramiro Jervis, MD, were successful in engaging providers to work in this new way of providing care from the clinic or their own homes, along with organizing ancillary staff to support the process. In addition, Sunset Terrace Behavioral Health successfully implemented Tele Mental Health Services at the end of March 2020 and in comparison to last spring, saw an impressive 2000-2000 more encounters per month.

Bellevue Adult Primary Care Center Serves Vulnerable Patients
At NYC H+H/Bellevue, under the leadership of Isaac Holmes, MD, the Adult Primary Care Center provided exemplary care to its vulnerable patient population throughout the COVID-19 pandemic, Overnight Bellevue’s care model transformed from one that took place solely in person to one based around virtual visits. Subsequently, the growth of televisits completed in primary care mirrored the exponential growth curve of COVID-19 cases in New York City. The clinic continued to excel, even though three-quarters of the providers were pulled from the clinic to inpatient care during the surge of cases in March, April and May, From 1/1/2020 - 3/8/2020, 9 televisits were completed and from 3/8/2020 – 8/30/2020, the Adult Primary Care Center completed 21,587 televisits.
VA NY Harbor Healthcare System’s Telediagnostic Transition

Having honed their virtual health care skills through tele-psychiatry, the VA New York Harbor Healthcare System was able to quickly transition to virtual/telehealth care exclusively for the patients in Primary Care using their own VA Video Connect (VVC) platform. In April 2020, less than 10% of the primary care visits were completed by VVC. In contrast, by the end of June 2020, 50% of the visits were accomplished by video and 50% by telephone, both with high patient satisfaction rates.

Keeping Doctors Up to Date during Pandemic

In response to annual academic conferences being cancelled, Dr. Katherine Hochman created a much-respected twice weekly COVID-19 CME lecture series for all faculty to obtain up-to-date clinical and research information and CME credits. As front-line teams were eager to rapidly recruit patients into clinical trials, principal investigators presented their COVID-19-related research to encourage referrals. In other sessions, specialists discussed how COVID-19 affects specific organ systems, including the skin, the gut, the kidney and the brain. In addition, journal clubs were led by hospitalists. Drs. Luke O’Donnell, David Kudlowitz and Anand Viswanath, with Infectious Disease input from Dr. Jennifer Lighter. In addition, Dr. Hochman started a Candid Conversations with Leadership Series to discuss a variety of issues with senior leadership, including career paths, leadership styles, and resiliency practices. By the end of July 2020, 26 sessions were conducted, with over 1,400 hours of CME provided.

Keeping up with COVID-19

As the COVID-19 pandemic set its eyes on NYC and patients were critically ill, lots of unknowns and changes in practices and protocol were occurring quickly. Keeping up-to-date was challenging but crucial. Dr. Sheetal Desai-Oggra stepped up by cataloging critical factors to help prepare NYU Langone Hospital - Brooklyn’s COVID army. What started off as an onboarding guide, turned into a COVID-19 Brooklyn Inpatient Resource Guide. This guide grew to be a comprehensive listing and living document with interdisciplinary up-to-date information, best practices and protocols to utilize while caring for COVID-19 patients. Between mid-April and early September, the Resource Guide site had over 3,400 visits by more than 200 users.

Meeting a Critical Need in a Time of Crisis - Virtual Buprenorphine Clinic

Individuals with opioid use disorder (OUD) often suffer from stress, social isolation, and lack of access to treatment and social supports which increases substance use and relapse. As clinic capacity and visits to the emergency department were limited during the COVID-19 response, Jennifer McNeely, MD and Ann Garment, MD, with colleagues from the Bellevue Adult Primary Care Clinic, the Department of Psychiatry, and NYC H+H Central Office of Behavioral Health, started the Virtual Buprenorphine Clinic (VBC) at NYC H+H/Bellevue to fill the gap in service. The VBC is the first of its kind to provide citywide low barrier access to treatment entirely via telemedicine, starting the Virtual Buprenorphine Clinic (VBC) at NYC H+H/Bellevue to fill the gap in service. The VBC is the first of its kind to provide citywide low barrier access to treatment entirely via telemedicine. During its first 10 weeks, the VBC saw 83 patients with no overdose events reported.

Enacting the Veteran Affairs’ Fourth Mission for the First Time in History

In response to the COVID-19 pandemic, this mission enabled local VA hospitals to take actions to ensure continued education for medical students, residents and faculty.

The Learning Must Go On: Remote Performance-Based Assessment

COVID-19 necessitated a quick conversion of our in-person competency-based, simulated trainee assessments to a virtual format. Building on our robust in-person Objective Structured Clinical Examination (OSCE) program, Sondra Zabar, MD, Kathleen Hanley, MD, Jennifer Adams, MD, and Richard Greene, MD converted the annual primary care OSCE into a virtual OSCE (using Zoom) within days of the event taking place. Twenty-four primary care residents participated in the virtual OSCE and since March, we have designed multiple remote learning activities including sending 215 newly graduated junior physicians through a simulated, night-on-call to practice critical patient safety practices, team communication and remote communication.

In debriefing these experiences, learners expressed genuine gratitude for the opportunity to practice virtually and noted a perceived direct applicability to their independent practice post-training. These experiences provided faculty with valuable insight into use of virtual assessments and learners with feedback on their performance with telemedicine.

Virtual education can be innovative, skills based and just in time workplace learning. We are excited to incorporate this methodology to meet the growing needs of telemedicine that will come in the future as we enter a post-COVID-19 society.
Flipped Classroom Allows Continued Point-of-Care Ultra Sound Teaching
As NYU Langone Health pursues its commitment to educating residents and faculty in Point-of-Care Ultrasound, methods of teaching an inherently hands-on practice had to be adapted, mindful of an era with COVID-19-related social distancing policies. Instead of traditional classroom-based lectures, learners reviewed pre-recorded lectures independently, then applied their knowledge in small virtual group sessions focused on reviewing clips and discussing pathology. To learn the hands-on practice of ultrasound, local experts have led very small bedside teaching rounds with patients on the wards and in the ICUs in three of our hospitals. Feedback from residents has been overwhelmingly positive. POCUS leaders, Michael Janjigian, MD and Caroline Srisarajivakul-Klein, MD, and Harald Sauthoff, MD are continuing this model for faculty and fellows in the new era of learning.

NoteSense: Using Artificial Intelligence to Improve Clinical Reasoning Documentation
Clinical reasoning (CR) is a core component of medical training, yet residents often receive little feedback on their CR documentation. To help increase the frequency and quality of feedback in this domain, we developed a machine learning (ML) algorithm for feedback on CR documentation. During Phase 1, investigators, Verity Schaye, MD, MHPE, Yindaloom Aphonanaphongs, MD, PhD, Marina Marin, MSc and others, developed and validated a human rating tool derived from Baker et al’s IDEA assessment tool to evaluate CR documentation. Phase 2 involved the creation of the machine-learning algorithm (“NoteSense”) – the process of a computer system making a prediction based on samples of past observations and testing its performance against human ratings – using a dataset of notes rated by the human rating tool generated in phase 1. In Phase 3 the team will be piloting the implementation of NoteSense. Residents will be given their individualized feedback on NoteSense via a dashboard in the EHR and will be able to review their patient notes and compare their performance with that of their peers. A future question of study is: Does higher quality clinical reasoning documentation translate to better patient outcomes?

Flexibility in Resident Teaching at NYU Langone Health-Brooklyn
Guided by Daniel Santori, MD, Marwa Moussa, MD, Rachael Hayes, MD, Frank Volpicelli, MD, and David Rhee, MD, housestaff team structure was revamped during the COVID-19 era to achieve two primary goals: to redistribute staffing to units with the most need, and to protect non-clinical time for residents. Medicine residents were divided into five cohorts rotating on different units on a one-week cadence. Each week, one cohort participated in a non-clinical ‘reading week’ with virtual assignments and didactics, one cohort served in a backup clinical capacity, and three cohorts staffed the general medicine units and ICUs. Many initiatives to operationalize care of COVID-19 patients enabled teaching teams, which traditionally comprise one senior resident and two interns, to be stripped down comprising of only two housestaff under the supervision of an attending physician. This new staffing structure, which was in place for ten weeks of the pandemic, allowed for delivery of flexible high-quality care while prioritizing resident education and well-being.

CREATING COMMUNITY
Making connections with others is a critical component of our experiences; all the more so during stressful times like the pandemic. With social distancing, virtual communities became integral. We quickly turned Grand Rounds into WebEx meetings, created opportunities to support each other and celebrated being Proud to be GIM.

Proud to be GIM Events
With a grant from the Society of General Internal Medicine, Drs. Jennifer Adams, Richard Greene and Mack Lipkin planned a series of career panel discussions celebrating internal medicine aimed at encouraging medical students and residents to pursue careers and the vast opportunities in general internal medicine (GIM).

February 26, 2020 Improving Lives through Research & Medicine
Drs. Sondra Zabar and Jennifer Adams welcomed an audience of close to 50 attendees at the kick-off event. The esteemed panel of researchers discussed their sometimes-winding path from internal medicine residency to population health research with a crowd of medical students, residents, faculty and the Twitterverse. Dr. Joseph Ravenell encouraged the audience to be willing to take risks early in their career and Dr. Melanie Jay talked about the importance of seeking out mentors along one’s journey. Dr. Mark Schwartz encouraged self-reflection on the environment that you want to work in and the people you want to work with when deciding on your medical specialty, and Dr. Francesca Gany talked about GIM as the ‘liberal arts’ of residency - a way to care for the whole patient.

May 27, 2020: GIM in Era of COVID
Sensing a need to connect during an unprecedented time, Dr. Sondra Zabar welcomed 50+ faculty, residents, students and alumni from across the country to this virtual gathering. Drs. Jennifer Adams, Richard Greene and Mack Lipkin facilitated a panel presentation highlighting GIM’s response during the pandemic, after which participants moved into virtual breakout rooms to share experiences and discuss the future of GIM in the Era of COVID. Meeting patients where they want to receive care: striving for equity and access to telemedicine services for all patients and expanding community partnerships for GIM to focus on social determinants of health were just a few of the important themes derived from discussions.

The event was eloquently wrapped up by Dr. Mack Lipkin. “We know and reaffirm we (GIM) are the matrix that holds the system together. We make it work every day. We made it work during the surge. Now we are the keepers and restorers of the highest standards of biopsychosocial medicine.”

8 DGIMCI IN THE ERA OF COVID

2020 ANNUAL UPDATE
Resiliency Rounds
Created in 2018, Resilience Rounds provides a space for our community to have vulnerable conversations about our lived experience as physicians. With COVID-19, Barbara Porter, MD and Milna Rufin, MD joined doctors of all training levels to discuss “uncertainty” and offer a space for catharsis and a support network during a time of great collective hardship. To initiate a frank discussion, Dr. Rufin shared her experience as a Chief Medical Resident when she felt she could have succumbed to the anger and sorrow of the tragedies around her. I had to forgive. Forgive the world for not being perfect; Forgive myself for not knowing all the answers; Forgive others for being just as scared, irritable and tired as I was. She realized, to move forward with hope and clarity, she had to forgive herself for being imperfect in an imperfect world in a deeply imperfect time.

Experiential Faculty Onboarding - Can We Talk?
Newly recruited clinicians have heterogeneous backgrounds and experiences and need a substantive introduction to their new institution’s patient communication expectations, safety culture, and standards for clinician performance. With restrictions of social distancing, Andrew Wallach, MD, Katherine Hochman, MD, Kinga Eliasz, PhD, Eric Goldberg, MD and Sondra Zabar, MD converted our Experiential Faculty Onboarding program, “Can We Talk?” into a remote telemedicine patient simulation experience. Faculty and staff met in small groups for greater connection. The remote encounter enabled a unique learning experience, as all the case simulations required utilizing telemedicine skills. We need to expand our communication skills tool box to deliver high value care in this new remote clinical environment. For 2020, we had over 40 faculty, physician assistants, and nurse practitioners participate in this unique experience.

Being Part of the Solution for Social Justice
As the country grappled with social injustices, Katherine Hochman, MD changed the focus of the NYU Langone Health Patient Experience book club to engage in conversations around social equity. In doing so, the NYULH community united to close the gap of understanding one another. The first book, Just Mercy by Bryan Stevenson, brought hundreds of participants in small group virtual conversations. Centralizing the discussion around the themes in the books, the community was able to discuss sensitive diversity and bias issues through the eyes and ears of the characters and without judgment. Additional books discussed were Song of Solomon by Toni Morrison and Native Son by Richard Wright.

PROGRAM FOR MEDICAL EDUCATION INNOVATIONS AND RESEARCH (PRMEIR)
Established in 2006, PrMEIR’s mission is to advance medical education scholarship and institute best practices to support patient-centered, evidence-based medical education.

PrMEIR Innovation Grants
Theme: Harnessing the Power of E-Health: Enhancing Curricula around Technology and Health
The Murray J. Berenson, MD grant in Medical Education Research sponsored 2 projects:

- Building Telemedicine Training Tools for Residents—a “trainee-centered” design approach
  PI: Katharine Lawrence, MD, MPH
  Co-PI: James Cho, MD
  Department of Medicine and Department of Population Health

- Tele-psychotherapy Training Development Project (TTDP)
  PI: Cory Chen, MD
  Co-PI’s: Amy Palfrey, PhD; Julia Buckley, PsyD; Christine Ingenito, PhD; Nicole Nehrig, PhD
  Department of Psychiatry/ VA New York Harbor

The Anthony J. Grieco, MD grant in Medical Education Research sponsored 2 projects:

- Education and Experience in Residency: Mapping Clinical Data to Capture Resident’s Inpatient Educational Experience
  PI: Daniel J. Sartori, MD
  Co-PI’s: David W. Rhe, MD and Jay Pendse, MD
  Department of Medicine – Division of General Internal Medicine and Clinical Innovation

- Competency-Based Hands on Curriculum using Simulation for Point of Care Ultrasound (POCUS) in the Neonatal Intensive Care Unit (NICU)
  PI: Robert Angert, MD
  Co-PI: Sweta Bhargava, MD
  Department of Pediatrics, Division of Neonatal Perinatal Medicine

Merrin Master Clinician Fellowship
A two-year program aimed at improving the quality of patient-centered care and clinical teaching, supported by private philanthropy.
- Carolyn (Car) Drake, MD, MPH: Merrin program will support Dr. Drake’s participation in Masters of Health Professions Education Program (MHPE)
- Alexandra Goodwin, MD: Trauma-Informed Care and Structural Determinants of Health in Vulnerable Populations
- Matthew Kladney, MD: Substance Use Disorders
COLLABORATION IN SCHOLARSHIP

COVID-19 has provided us with new research opportunities, allowing us to collaborate across sites, with other Departments, and increasing the recognition of input of our clinicians on the front lines.

Quality Improvement in a Rapidly Changing World

Health care professionals were inundated with new information on a daily basis during the height of the pandemic. DGIMCI faculty played a major role in distilling this information and implementing solutions to improve quality of care.

Using Predictive Analytics to Help Determine Who is Safe for Discharge

Drs. Jonathan Austrian and Yin Aphinyanaphongs (Department of Population Health), as part of the Predictive Analytics Unit at Tisch Hospital/Kimmel Pavilion, developed and implemented an innovative algorithm, the “Covid-19 Low Adverse Event Risk within 96 (hours)” to help inpatient teams determine whether COVID-19 patients might be medically ready for discharge. It calculates the risk of no adverse events within the next 96 hours following the prediction time. Adverse events include: ICU transfer, intubation, mortality, hospice discharge, re-presentation to the emergency department, oxygen requirements exceeding nasal cannula at 6L/Mn.

Community Health Workers play Critical Role in Identifying Unmet Social Needs of Patients

Community Health Workers (CHWs) conducted telephone interviews with patients regarding food security and other social needs. Between April and June 2020, CHWs spoke with over 6000 patients. 1,625 (25%) patients (CHWs) conducted telephone interviews with patients regarding food security and other social needs of patients who were tested for COVID-19 at NYC H+H. Community health workers Mercedes Forster, MD, Emily Foote, MD and Jeni Clapp, MD set out to identify unmet social needs. Additional self-identified unmet needs included medication refills, housing, and health insurance. Patients needing food assistance were almost 3 times more likely to report needing another type of social assistance, suggesting that targeted screening for food insecurity encourages patients to self-identify additional needs.

In response to the increased demand for patients needing home oxygen upon discharge, Amarpreet Singh Bains, MD, Erwin Wang, MD, Frank Volpicelli, MD, along with Deserie Duran (case management), Lorna Lee-Riley (social work), and the Discharge Command Center, partnered with NYU Langone Hospital – Brooklyn’s largest vendor of durable medical equipment to streamline the process for getting patients home with oxygen. In April, out of 500 patients with COVID-19 discharged, 110 needed home oxygen, a ten-fold increase from the typical 11 per month. By partnering with the vendor, time to set up home oxygen was reduced by 50%, helping preserve precious inpatient beds during a critical time. Access to the on-site representative is much improved and quick interventions continue to be made when necessary.

“Factors Associated With Hospital Admission and Critical Illness Among 5279 People With Coronavirus Disease 2019 in New York City: Prospective Cohort Study.”

Christopher Petrilli, MD, Luke O’Donnell, MD, Leora Horwitz, MD and colleagues conducted an in-depth examination of the demographics, risk factors and outcomes of the COVID-19 patients cared for by our entire health system. They quickly published research determining that Age >75, BMI > 40, and history of heart failure are significant factors associated with increased risk of progression to critical illness for admitted patients (i.e. requiring ICU level care, ventilator support or death). However, elevated initial laboratory inflammatory markers and low oxygen saturation were the strongest predictors of worse outcomes. Risk of critical illness and mortality decreased significantly over the study period, potentially suggesting improvements in care.

Understanding the Relationship Between Obesity and COVID-19

Melanie Jay, MD, MS, Stephanie Orstad, PhD, and Lauren Gerchow, MS, RN have been monitoring the impact of the COVID-19 pandemic on participants enrolled in the Financial Incentives for Weight Reduction (FiReWoRk) Study, a one-year behavioral intervention for obesity. In July 2020, in-depth qualitative interviews were conducted with 15 patients about their experiences maintaining weight and healthy habits during the pandemic. Patients reported that initially they responded to the pandemic by eating more and being more sedentary. However, because they had developed new habits as part of the FiReWoRk Study, they were able to adapt their eating and exercise routines to counteract barriers to weight management.

Post-discharge Outcomes in Patients Treated for Severe COVID-19 Disease

Studying the long-term effects of COVID-19 disease is critical for understanding the cumulative impact of this disease beyond hospitalization and mortality. Drs. Himali Weerahandi, Katherine Hochman, Leora Horwitz, and colleagues, are conducting a prospective cohort study to evaluate overall health status and the physical and mental health of patients discharged after severe COVID-19. Their initial findings demonstrate while most patients began with overall health slightly better than the United States average, one month after discharge (approximately 7-9 weeks after onset of disease) they reported significantly worse overall, physical and mental health. Three quarters reported persistent shortness of breath; more than one in eight required oxygen. Next steps will be to examine objective functional outcomes and longer term outcomes.
### 2019-2020 Active Research

<table>
<thead>
<tr>
<th>Faculty Name(s)</th>
<th>Project Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Himali Weerahandi, Katherine Hochman, Leora Horwitz</td>
<td>Examination of NYU dataset to look at differences in how people with and without obesity present with COVID-19</td>
</tr>
<tr>
<td>Melanie Jay, Leora Horwitz, Brian Elbel, Simon Jones</td>
<td>Analyze data on obesity and COVID-19</td>
</tr>
<tr>
<td>Melanie Jay, Glenn Fishman</td>
<td>COVID-19 Task Force to develop a registry and clinic for COVID-19 survivors</td>
</tr>
<tr>
<td>Melanie Jay with Comprehensive Program on Obesity faculty</td>
<td>Review of Pediatric COVID data and obesity at NYU</td>
</tr>
<tr>
<td>Anand Viswanathan</td>
<td>• Repeat COVID-19 Testing in Intubated Patients • Vitamin D and Zinc levels in COVID-19 • Fungemia in COVID-19</td>
</tr>
<tr>
<td>Daniel Sartori, Katharine Lawrence, Sondra Zabar</td>
<td>Preparing Trainees for Telemedicine</td>
</tr>
<tr>
<td>Sunil Saith, Chen Fu</td>
<td>Cancer in COVID-19 Patients</td>
</tr>
<tr>
<td>Sunil Saith, Ramiro Jervis</td>
<td>Outcomes in the Hispanic Population with COVID-19</td>
</tr>
<tr>
<td>Sunil Saith</td>
<td>Time to Intubation in ICU Patients with COVID-19</td>
</tr>
<tr>
<td>Sunil Saith, Ramiro Jervis, Aye Khin, Faryal Osman, Lisa Schwartz, Jung Eun Ha</td>
<td>What Have You Got To Lose? Tisdale Score For Risk Of Torsade De Pointe For Patients Receiving Hydroxychloroquine During Covid-19 Pandemic In A New York Hospital</td>
</tr>
<tr>
<td>Amarpreet Bains, Erwin Wang, Frank Volpicelli</td>
<td>Discharge Command Center, a centralized review of pending discharges by leadership from Case Management, Social Work, Rehab Services, and Department of Medicine</td>
</tr>
<tr>
<td>Amarpreet Bains, Erwin Wang, Frank Volpicelli</td>
<td>Streamlining the Process for Discharging COVID-19 Patients with Oxygen</td>
</tr>
<tr>
<td>Tamta Chkhivadze, Jeffrey Berger</td>
<td>A Randomized Trial of Anticoagulation Strategies in COVID-19</td>
</tr>
<tr>
<td>Steve Liu</td>
<td>Evolving Oxygenation Management Reasoning in COVID-19</td>
</tr>
<tr>
<td>Steve Liu, Caroline Sweeney, Caroline Srisarajavikut-Klein, Amanda Klinger, Irina Dimitrova, Verity Schaye</td>
<td>Clinical Characteristics of First 300 COVID-19 Patients admitted to Bellevue, and Associated Co-morbidities for Critical Illness and Mortality</td>
</tr>
<tr>
<td>Taye Odedosu (with NYC H+H and NYU Departments of Population Health)</td>
<td>COVID-19 Health Disparities at NYC Health + Hospitals</td>
</tr>
<tr>
<td>Ian Fagan (with NYC H+H Population Health)</td>
<td>Factors associated with COVID-19 Readmissions</td>
</tr>
<tr>
<td>Amanda Klinger, Vikram Mukherjee, and critical care colleagues</td>
<td>Optimal Strategy for Timing of Intubation in COVID-19 Respiratory failure</td>
</tr>
<tr>
<td>Isaac Holmes</td>
<td>Characterizing Employees of NYC H+H Who Tested PCR+ but IgG-</td>
</tr>
</tbody>
</table>

### 2020 ANNUAL UPDATE

<table>
<thead>
<tr>
<th>PI Name</th>
<th>Funder</th>
<th>Title</th>
<th>Funding Period</th>
<th>Full Award</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer Adams</td>
<td>NYS Department of Health</td>
<td>Doctors Across New York Ambulatory Care Training Program</td>
<td>1/1/2018 – 4/1/2020</td>
<td>$875,000</td>
</tr>
<tr>
<td>Zinkoff Fund</td>
<td></td>
<td>Database for Research in Academic Medicine (DREAM)</td>
<td>10/1/2019 – 9/30/2020</td>
<td>$125,000</td>
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<tr>
<td>Jeannette Beasley</td>
<td>NIH (Subcontract with Albert Einstein College of Medicine)</td>
<td>CDTR Pilot and Feasibility</td>
<td>8/1/2017 – 12/31/2019</td>
<td>$40,000</td>
</tr>
<tr>
<td></td>
<td>Center for Study of Asian American Health-Pilot Project</td>
<td>Validating a Dietary Screener Adapted for Asian Americans</td>
<td>9/1/2020 – 6/30/2021</td>
<td>$30,000</td>
</tr>
<tr>
<td>Richard Greene</td>
<td>NIH R01 (Subcontract with NYU Washington Sq.)</td>
<td>Application of a Syndemic Framework to HPV and HSV Infection in Emergent Adult Men</td>
<td>8/5/2017 – 7/31/2020</td>
<td>$133,039</td>
</tr>
<tr>
<td>Josiah Macy Jr. Foundation</td>
<td></td>
<td>Macy Faculty Scholars Program</td>
<td>9/1/2019 – 8/31/2021</td>
<td>$280,000</td>
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<tr>
<td></td>
<td>NIH R01 (Subcontract with UCLA)</td>
<td>Financial Incentive Strategies for Weight Loss- Firework</td>
<td>2/13/2017 – 6/30/2021</td>
<td>$1,395,711</td>
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<tr>
<td>VA</td>
<td></td>
<td>Testing the efficacy of a technology-assisted intervention to improve weight management of obese patients within Patient-Aligned Care Teams at the VA</td>
<td>7/1/2017 – 6/30/2021</td>
<td>$1,091,920</td>
</tr>
<tr>
<td>Ann Garment &amp; Joshua Lee</td>
<td>Health Resources and Services Admin.</td>
<td>NYU Addiction Medicine Fellowship Expansion: Growing the Addiction Medicine Workforce for the Medically Underserved</td>
<td>7/1/2020 – 6/30/2025</td>
<td>$3,000,001</td>
</tr>
<tr>
<td>Mack Lipkin</td>
<td>University of Pennsylvania &amp; Mayo Clinic</td>
<td>Building Commitment to Biopsychosocial Care: NYU Primary Care Medicine Residency Psychosocial Rounds</td>
<td>7/1/2019 – 5/31/2021</td>
<td>$40,000</td>
</tr>
<tr>
<td>Himali Weerahandi</td>
<td>NIH K23</td>
<td>Characteristics of Transitions from Skilled Nursing Facility to Home Following Heart Failure Hospitalization</td>
<td>8/1/2019 – 6/30/2020</td>
<td>$903,541</td>
</tr>
<tr>
<td>Sondra Zabar</td>
<td>Health Resources &amp; Services Admin.</td>
<td>Primary Care Training and Enhancement</td>
<td>7/1/2015 – 6/30/2020</td>
<td>$1,828,091</td>
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<tr>
<td></td>
<td>NYU Clinical and Translational Science Institute</td>
<td>Strategic Teamwork for Effective Practice: Mentor Development Program</td>
<td>4/1/2019 – 3/31/2020</td>
<td>$25,000</td>
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<tr>
<td></td>
<td>Medical College of Wisconsin</td>
<td>Becoming a Physician: Understanding Professional Identity Formation</td>
<td>1/1/2020 – 12/31/2020</td>
<td>$195,156</td>
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<tr>
<td></td>
<td>NYU Washington Sq.</td>
<td>USP at Student Health Center</td>
<td>1/1/2020 – 8/31/2021</td>
<td>$32,000</td>
</tr>
</tbody>
</table>


FACULTY ACCOMPLISHMENTS

Jonathan Austrian, MD
Promoted to Associate Professor (Clinical), Quality and Safety Day Award

Caren Behar, MD
Promoted to Clinical Professor

Hyung (Harry) Cho, MD
Under 40 lists for Modern Healthcare Emerging Leaders and Becker’s Healthcare Rising Stars

Ann Garment, MD
Appointed Chair of the 2022 American College of Physicians Internal Medicine Scientific Program Committee; Selected by the Department of Medicine to attend Career Advancement and Leadership Skills for Women in Healthcare, Harvard Medical School

Celine Gounder, MD
Promoted to Clinical Assistant Professor

Richard Greene, MD, MHPE
2019 Rising Educator – NYU Educator Community Awards, Fourth Annual Medical Education Innovations & Scholarship Day

Katherine Hochman, MD
Attended AAMC Mid-Career Women Faculty Leadership Development Seminar

Isaac Holmes, MD
Accepted into the 2020 ACLGIM LEAD Program

Margaret Horlick, MD, MHPE
Completed her Masters in Health Professions Education

Michael Janjigian, MD
Teacher of the Year - Inpatient Services

Melanie Jay, MD, MS
Co-chair of the NYU Symposium on Obesity and COVID-19

Matthew Kladney, MD
Teacher of the Year - Outpatient Services

David Kudlowitz, MD
Promoted to Assistant Professor (Clinical); and received the Leonard J. Tow Humanism in Medicine Faculty Award

Marwa Moussa, MD
Appointed to lead the Hospitalist Program at NYU Langone Hospital – Brooklyn

Valerie Perel, MD
Promoted to Clinical Associate Professor

Christopher Pettrilli, MD
Graduated from the Langone Academy Early Career Faculty Program

Vicky Prater, MD
Promoted to Clinical Assistant Professor

Stefanie Reiff, MD
Selected to participate in the 2020 Education Mission Leadership Development Program

Stephanie Rein, MD
Promoted to Clinical Associate Professor

Sunil Saith, MD
Promoted to Clinical Assistant Professor

Daniel Sartori, MD
Teacher of the Year - Brooklyn; Selected to participate in the 2020 Education Mission Leadership Development Program

Verity Schaye, MD, MHPE
Selected by the Department of Medicine to attend Career Advancement and Leadership Skills for Women in Healthcare, Harvard Medical School

Marina Shet, MD
Appointed as Director of the Nocturnist Program at NYC H+H/Bellevue

Frank Volpicelli, MD
Appointed as Associate Chief Medical Officer, NYU Langone Health – Brooklyn

Andrew Wallach, MD
Chief Medical Officer of the NYC Test & Trace Corps, NYC Health + Hospitals; NYC Testing Innovation Council Member; NYC Economic Development Corporation

Erwin Wang, MD
Promoted to Assistant Professor (Clinical)

Inducted into the Gold Humanism Honor Society:
Simone Blaser, MD
Catherine (Annie) Varnum, MD
Milna Rufin, MD
Kevin Ip, MD

We are pleased that the following NYU Grossman School of Medicine residents joined our DGIMCI faculty:

Marilyn Chacko, MD
Brooklyn Hospitalist

Hon Chau, MD
Tisch Hospitalist Scholar

Carolyn (Cari) Drake, MD
Bellevue Hospitalist

Bhaskara Garimella, MD
Brooklyn Hybrid

Sree Kolli, MD
Tisch Hospitalist Scholar

Gregory Marecki, MD
Tisch Hospitalist Scholar

Jrada Morris, MD
Bellevue Hybrid

David Packer, MD
Tisch Hospitalist Scholar

Jesse Rafel, MD
Tisch Hospitalist

Milna Rufin, MD
Tisch Hospitalist/IMA

Christine Schindler, MD
Gouverneur Primary Care Clinic

Jeremy Sullivan, MD
Brooklyn Hospitalist

Pulkit Taunk, MD
Bellevue Hospitalist

Christian Torres, MD
Bellevue Hybrid

William West, MD
Bellevue Hospitalist
NATIONAL AND REGIONAL RECOGNITION

Sondra Zabar, MD
American Association of Medical Colleges 2020 Abraham Flexner Award for Distinguished Service to Medical Education

In recognition of her demonstrable impact across the medical education continuum, significant contribution to advancing the science of health professions education, scholarship and personal expertise as a teacher and mentor, the AAMC awarded Sondra Zabar, MD, the 2020 Abraham Flexner Award for Distinguished Service to Medical Education, its most prestigious honor.

Ann Garment, MD
Gold Foundation Pearl Birnbaum Hurwitz Humanism in Healthcare Award - Honorable Mention

The Award is presented to a woman who exemplifies humanism and has advanced – through her scholarship, advocacy and leadership – the well-being of vulnerable or underserved populations in the healthcare arena. Dr. Garment’s efforts to help those struggling with substance abuse, torture survivors, and the under/uninsured are extraordinary. The jury was especially impressed with her leadership and work in establishing the Primary Care Safety Net Clinic with its vast impact.

Yinan Lan, MD
US News Hospital Hero Champion & NYC State of City Hero

Dr. Yinan Lan is the medical director and co-founder of the H+H/Bellevue complex care, Primary Care Safety Net Clinic serving homeless or housing unstable patients in a team-based model. The clinic expanded to provide patients not just basic medical care, but also addiction treatment, housing navigation, street outreach, food and clothing support, and care coordination. Dr. Lan led H+H/Bellevue’s COVID-19 response for the city’s homeless population. She created novel outreach programs to maintain continuity of care with patients who otherwise would easily be lost during this tumultuous time. Dr. Lan’s dedication to mission makes her the ultimate advocate for this particularly vulnerable population in these catastrophic times.

Kathleen Hanley, MD
2020 SGIM National Award for Scholarship in Medical Education

Dr. Hanley is recognized for her passion, dedication and substantial contributions to the field of medical education. Her innovative work in substance abuse education has created evidence-based educational strategies and assessments across disciplines and levels of learners. Her work has influenced a new generation of health care professionals on how to communicate, treat and research the critical area of substance use disorder.

Katharine Hochman, MD, MBA
Dr. Hochman is a key leader in NYU’s COVID-19 pandemic response. She created the COVID Army (850+ people) to redeploy man and woman power, mobilize physicians, medical students and other frontline staff to where they were needed. To connect families and the care team, Dr. Hochman created NYU Family Connect and hosted virtual CME educational programs about COVID-19 treatment, research, and findings, with hundreds of attendees at each one. Due to Dr. Hochman’s inclusion of medical students in the COVID-19 response and commitment to medical education, she was chosen to deliver the keynote address to the 2020 Graduation of NYU Grossman School of Medicine.

Andrew Wallach, MD
Dr. Wallach is a dedicated, veteran physician and healthcare leader for NYC, especially for vulnerable populations. He serves as the Chief Medical Officer for Ambulatory Care at the NYC Health+Hospitals (H+H) Central Office. His response to the COVID-19 crisis in NYC has been unparalleled. He serves on the NYC H+H Incident Command Team; and, was appointed as the Chief Medical Officer for the NYC Test & Trace Corps, where he oversees all clinical activity for testing and contact tracing citywide. In addition, Dr. Wallach championed the transition to telemedicine visits in the NYC H+H ambulatory care clinics. He also worked to create measures, including a text messaging platform to monitor symptoms and ensure COVID-19 patients received continued health monitoring in the home after discharge.

Crain’s Notable In Health Care In NYC, Honoring Professional, Civic And Philanthropic Achievements

Photo credit: Don Hamerman
General internal medicine physicians are the primary caregivers. We are well positioned to take the lead in enrolling participants in the essential clinical trials for a COVID-19 vaccine. We are leading the way in the telemedicine transition while tracking equity in access. Moreover, we are educators who constantly strive for ways to improve training for the next generation of physicians.

Expanding Telemedicine and Ensuring Equity

The rapid implementation of telemedicine during the COVID-19 pandemic has made way for a future where telemedicine will persist. Our challenge is to formulate this new paradigm ensuring equitable access including elimination of language and technical barriers to the telemedicine platform. The unique communication skills needed for telemedicine require an investment in medical education across all levels of learners.

Using Data to Drive Residency Curriculum Innovations

Using Simulation to Train Research Coordinators and Staff

In response to the COVID-19 pandemic, Dr. Mark Mulligan and his amazing team is expanding the reach of NYU's Vaccine and Treatment Evaluation Unit and creating 4 new sites, including NYC H+H/Bellevue Hospital, the Manhattan VA, NYU Brooklyn and NYU Winthrop with GIM leading on the front lines. We will be participating in large scale clinical trials of COVID-19 vaccine candidates with the ultimate goal of ending this pandemic. Each site is creating its own clinical trial research team, spearheaded by GIM and Infectious Disease faculty, to conduct these clinical trials. Bellevue Hospital: Jennifer Lee Dong, MD, Angelica Kottkamp, MD; Manhattan VA: Melanie Jay, MD, MS, Sabrina Felson, MD; NYU Brooklyn: Lalitha Parameswaran, MD, Stephanie Sterling, MD; NYU Winthrop: Martin Backer, MD, Steven Carsons, MD.

Utilizing Clinical Dashboards to Improve Quality Care

We must advocate for parity in reimbursement for telemedicine services; as we learned during the pandemic, provision of remote services is similarly intensive as in person visits. By creating a new practice model incorporating clinical staff, we can ensure efficient care and patient satisfaction.

Technical innovations are growing exponentially. The future of telemedicine will incorporate home monitoring abilities that we have yet to imagine. Equitable implementation of these systems will be essential so that telemedicine does not become a new contributor to disparities in social determinants of health.

Finding a Vaccine for COVID-19

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Tisch Hospital
Katherine Hochman, MD, MBA
Section Chief, General Internal Medicine
Director, Hospitalist Program
Eric R. Goldberg, MD, FACP
Medical Director, NYU Langone Internal Medicine Associates

NYU Langone Hospital – Brooklyn
Frank M. Volpicelli, MD
Chief of Medicine
Marwa Moussa, MD
Director, Hospitalist Program
Isaac Dapkins, MD
Chief Medical Officer
NYU Family Health Centers

NYC Health + Hospital/Gouverneur
James Schmidtberger, MD
Director, Department of Medicine
Kathleen Hanley, MD
Associate Director, Department of Medicine

VA NY Harbor Health Care System
David Stern, MD, PhD
Chief of Medicine
Neil Shapiro, MD
Assistant Chief of Medicine
Joseph Leung, MD
Director, Outpatient Medicine Section Chief, GIM
Seagram Villagomez, MD, FACP
Chief, Section of Hospital Medicine

DGIMCI is supported by an incredible and dedicated team:
Lauren Soneira, Division Administrator
Stephanie Mejia, Administrative Coordinator
Mara McCrickard, Administrative Assistant
Heather Levitt, Program Manager
Naya Jerome, P4MEIR Program Manager
Deborah Cooke, Clinical Project Manager

NYC Health + Hospital/ Bellevue
R. Nathan Link, MD, MPH
Medical Director
Douglas B. Bails, MD
Chief of Medicine
Ann R. Garment, MD
Section Chief, General Internal Medicine
Andrew Wallach, MD, FACP
Associate Director, Clinical Innovations and Clinical Affairs
Michael Janjigian, MD, FACP
Co-Associate Chief of Medicine
Isaac Holmes, MD
Medical Director, Bellevue Adult Primary Care
Verity Schaye, MD
Medical Director, Inpatient Medical Units
2020 DGIMCI BY THE NUMBERS:

$13.7 MILLION
TOTAL FUNDED RESEARCH

$310,000
RAISED FOR EQUIPMENT
INCLUDING:
43,000 N95 MASEKS
750 GOWNS
500+ SCRUBS

13 HOUSESTAFF
PARTICIPATED IN THE NYC H+H COVID-19 HOTLINE

77,532 TELEVISITS
CONDUCTED BY GENERAL INTERNAL MEDICINE FACULTY
GROUP PRACTICES (Mar-Aug)

756 TOTAL FACULTY

152 ACCEPTANCES
TO NATIONAL ACADEMIC CONFERENCES

25 RESEARCH PROJECTS
RELATED TO COVID

100 MEALS
DONATED THROUGH DGIMCI
CONTACTS TO CLINICAL TEAMS
DURING HEIGHT OF PANDEMIC

71 GENERAL INTERNISTS
SERVED AS PART OF THE NYU COVID ARMY

1 DGIMCI FACULTY
ENGAGED IN COMPASSIONATE CARE, INNOVATIVE RESEARCH
AND MEDICAL EDUCATION