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MESSAGE FROM DIVISION DIRECTOR

Our 2023 Research Report highlights the novel and influential work being done by the faculty in the Division of General Internal Medicine and Clinical Innovation (DGIMCI). These projects demonstrate the commitment of our healthcare system and valued partnership with our patients. It is all made possible by the passion and grit of engaged faculty, residents and medical students.

This year we highlight research being done in collaboration with the Family Health Centers (FHC) at NYU Langone Health (NYULH) in Brooklyn; including recognizing our newly recruited, highly accomplished faculty.

We continue to be successful in core areas of obesity, diabetes, hypertension, LGBTQ+ health, telehealth and medical education with over $14 million in external funding. I am especially pleased to announce that this past year, our faculty were awarded four grants from nationally recognized medical education foundations.

Alliances across the NYU institution and collaborations with external organizations enrich our research accomplishments and we are committed to expanding our research infrastructure. Our current foundation and philanthropic funded pilot projects continue to yield larger federally funded grants.

Our goal is to enable our faculty to transform healthcare through innovative research, benefiting the clinicians we train and the patients and communities we serve. We invite you to learn about our research and collaborate with us.

Sondra Zabar
Professor of Medicine
Director, Division of General Internal Medicine and Clinical Innovation
NYU Grossman School of Medicine
DGIMCI has expanded its presence in Brooklyn through recruitment and collaboration of key faculty researchers. They are conducting nationally recognized clinical research within the Sunset Park community focusing on the improvement of care delivery, health outcomes and reduction of barriers to the social determinants of health.

Isaac Dapkins, MD is the chief medical officer of the FHCs at NYU Langone in Sunset Park, Brooklyn and a Clinical Associate Professor in the Departments of Medicine and Population Health. He is dedicated to creating systematic change to expand and improve the delivery of care to disenfranchised and underserved communities in FHCs. His work focuses on addressing disparities and social determinants of health. He collaborates with teams to develop interventions to optimize the care of the most vulnerable populations, including clinical decision support tools to predict disease severity in patients.

Valy Fontil, MD, MAS, MPH, is the Medical Director of Research at the FHCs and Assistant Professor with the Departments of Medicine and Population Health. He is a general internist, health services and digital health researcher who specializes in innovations for high-risk, low-income populations and the safety-net health systems. His research employs implementation science methodologies, mathematical simulation modeling, and digital health technologies to improve the quality of outpatient care. He has particular expertise in hypertension and cardiovascular risk reduction.

Arielle Elmaleh-Sachs, MD, MS is the Medical Director for the Sunset Park FHC Adult Medicine and Specialty Clinics. She serves as a Faculty Research Lead for the FHC Internal Medicine Residency Program and the Clinical Lead on a HRSA Optimizing Virtual Care grant, where she oversees multiple QI initiatives within the FHCs.
Elaine De Leon, MD, MHS, a graduate from our NYU Grossman School of Medicine (NYUGSOM) and Primary Care Residency Program, is a general internist who practices at the Park Ridge FHC and is a junior research scholar in collaboration with the Department of Population Health. Her research focuses on the development and delivery of patient-centered and community-based behavioral interventions and care delivery models to reduce racial and ethnic disparities.

Sandeep Bhat, MD, MBA is the HIV Network Medical Director at the FHC. He leads research activities directed to benefit this unique population via quality improvement initiatives. He collaborates with other organizations’ research teams to improve cardiovascular health for HIV patients, prevent hospitalizations in high-risk patients using health coaches, and enhance prostate screening in African American men using a shared decision model. Additional research focuses on initiatives to improve HIV and Hepatitis B/C screening rates, HIV viral suppression, and PrEP uptake across the network.

Alexander Azan, MD, is a Post-Doctoral Training Fellow with the Population Health Science Scholars Program and a general internist at the Flatbush FHC. His research examines the impacts of climate change on health and health equity related to structural and intermediary determinants of health. Driven by his interest in policy-oriented, translational research, he employs geospatial and quasi-experimental methods to perform health outcome evaluations of various land use and traffic-related climate adaptation policies in urban environments.
Beyond Bridges: Building Community and Clinical Partnerships in Sunset Park, Brooklyn

NYULH received a $166 million gift from the Bezos family to galvanize the health and well-being of the diverse populations across the Sunset Park Brooklyn community. Beyond Bridges aims to develop a dynamic community-clinic linkage model of health care that addresses community and clinical needs through the lens of the social determinants of health framework across several integrated pillars (e.g., Research, Clinical, Community, Evaluation, and Education). The Research Pillar of Beyond Bridges partners with the Clinical Translational Science Institute (CTSI) to provide infrastructure and services, including the NYU Langone Brooklyn Clinical Research Center, to foster collaborative research at NYU Langone Brooklyn, the FHCs at NYU Langone Brooklyn, and within the Sunset Park community. DGIMCI faculty have leadership roles in the Research and Education Pillars with the Beyond Bridges initiative.

Melanie Jay, MD, MS, Aaron Lord, MD (Chief, Neurology at NYU Langone Hospital-Brooklyn), and Rachel Gross, MD (Assistant Professor, Department of Pediatrics), serve as Co-Directors of the Research Pillar. They are leading development and expansion of the clinical research infrastructure, increasing the diversity of the research workforce, and conducting community outreach to promote research participation among underrepresented groups. Dr. Jay’s research focuses on improving the treatment and prevention of obesity, particularly in primary care settings through her Managing Obesity Through Innovation and Effectiveness (MOTIVATE) Research Lab. She also is the Director of Research Collaboration and Mentoring for DGIMCI.

Cristina Gonzalez, MD, MEd, recently joined DGIMCI and the Institute for Excellence in Health Equity (IEHE) as the Associate Director of Medical Education. She is an international expert in skills-based curricular interventions in implicit bias recognition and management (IBRM). The Beyond Bridges Education Team, including Rachael Hayes, MD, Daniel Sartori, MD, Sondra Zabar, MD, Mark Schwartz, MD, Isaac Dapkins, MD, Kathy Xu, MD, and Matthew Lam, MD, aims to develop a comprehensive, skill-based curriculum for the residency program. The goal is to train residents to effectively care for diverse patient populations in the contexts in which they live.

Brita Roy, MD, MPH, serves as the Director of Community Health and Clinical Outcomes for Beyond Bridges and is a general internist and community-engaged health equity researcher who joined the NYULH community this year. In this role, she has launched initiatives to increase engagement in primary care and to integrate community health workers into the FHC primary care clinics. In addition, her scholarly work uses epidemiologic methods to identify health-promoting positive psychosocial factors that influence health outcomes and health equity at the individual and community levels.
Brooklyn Research Highlights

**Scientific and Technical Education Pipeline Program for Students (STEPPS)**

**Co-Leads: Melanie Jay, MD, MS; Marie Bragg, PhD**

As part of the Beyond Bridges Research Pillar, The STEPPS program aims to enhance diversity in the research workforce by supporting individuals from underrepresented populations in science and research, starting from high school students to junior faculty. In its inaugural year, the program is launching high school and college undergraduate initiatives. The high school program starts in the Fall 2023; workshops, a mini-mentorship program, and training at NYULH’s clinical research center will promote awareness of research careers. At the undergraduate level, the program offers a 10-month, stipend-supported internship in a clinical research lab, formal didactics in clinical research, and preparation for research coordination or graduate school applications. The first cohort of 10 students all identify as having at least one of the following: URiM, first generation college student, or economically disadvantaged; and most are bilingual or multilingual in Arabic, Bengali, Creole, Hindu, Korean, Russian, Spanish and Urdu. In the following years, the program will expand to include graduate students, post-doctoral fellows, and junior faculty. These advanced programs will focus on fostering scientific inquiry, productivity, and building research teams.

**Funder:** Bezos family

**Community Health and Transitions of Care Curricula**

**Co-Leads: Cristina Gonzalez, MD, MEd; Daniel Sartori, MD; Rachael Hayes, MD; Isaac Dapkins, MD; Sondra Zabar, MD; Mark Schwartz, MD**

The first-year resident community health curriculum centers on understanding Sunset Park’s community, local community-based organizations, and resources at the Family Support Center (FSC). They engage with residents at the FSC food pantry and Sunset Park Older Adult Center, collaborating with a panel of Community Health Workers. Second and third-year residents educate hospital patients, assist in safe discharge planning, and continue care in the Transitional Care Management (TCM) Clinic for post-discharge continuity, focusing on a seamless hospital-to-home transition and community resource referrals. Within the Education Pillar of Beyond Bridges, residents’ care transition skills are enhanced through a simulation program where trained actors mimic routine TCM visits, offering scripted interactions and feedback on clinical, communication, and resource linkage skills. This innovative approach aims to equip residents with authentic training for delivering quality care to Sunset Park’s patients.

**Funder:** Bezos family

**Medication Adherence for Long-term Improvements in Hypertension through a Team-based Care Approach**

**PI:** Antoinette Schoenthaler, EdD; **Co-Is: Isaac Dapkins, MD; Elaine De Leon, MD, MHS**

Despite evidence showing the efficacy of hypertension care, many cases remain uncontrolled. We conducted a pre-implementation evaluation using surveys, analytics, and interviews with FHC staff. Our aim was to identify facilitators and barriers for implementing a technology-facilitated hypertension management trial in six FHC primary care sites in New York City. Surveys measured staff characteristics, adaptive reserve, evidence-based practice attitudes, and implementation leadership scores. Findings from interviews identified potential facilitators and barriers to implementation; specifically, staff reported that complex barriers to hypertension care, control, and clinical communication exist; there is a recognized need to improve hypertension care; in-clinic challenges with digital tool access imposes workflow delays; and despite high patient loads, staff are motivated to provide high-quality care. This study pioneers the use of the Consolidated Framework for Implementation Research (CFIR) in a rigorous pre-implementation evaluation, serving as a model for similar trials addressing contextual factors impacting implementation success in FHCs.

**Funder:** National Institute on Minority Health and Health Disparities (NIMHD) and Health Resources and Services Administration (HRSA)
Diabetes Prevention Program to Geriatric Populations for Spanish-Speaking Individuals  
**PIs:** Elaine De Leon, MD, MHS; Jeannette Beasley, PhD, MPH, RD; Joshua Chodosh, MD  
This project extends upon the work of the NIH-funded parent study BRIDGE, a diabetes prevention program tailored for older adults with prediabetes, to focus on culturally adapting BRIDGE for the FHC’s Spanish-speaking Hispanic/Latinx community (BRIDGE-S). We have translated and are conducting four BRIDGE-S sessions this summer, both virtually and in-person with community partners at Senior Planet and at the Sunset Park Older Adult Center, a part of the FHC. An NIH supplement was submitted to further enhance BRIDGE program engagement with older Spanish-speaking patients through key informant interviews with FHC staff as well as surveys and focus groups with potential participants. The involvement of summer scholars - two medical students from Puerto Rico and one NYU School of Global Public Health MPH student - has propelled progress on these efforts. Together, we aspire to create a transformative impact on healthcare equity for our Spanish-speaking Sunset Park community.  
**Funder:** Sub-project of National Institutes of Health (NIH) R01, BRInging the Diabetes Prevention Program to Geriatric Populations (BRIDGE)

Characterizing the Barriers and Facilitators to Semaglutide Uptake at the NYU Langone FHCs  
**PIs:** Melanie Jay, MD, MS; Co-Is: Elaine De Leon, MD, MHS; Olga Filapova, MD; Arielle Elmaleh-Sachs, MD, MS  
GLP-1 receptor agonists (GLP-1 RA) like semaglutide hold promise for obesity care. A prior trial showed significant weight reduction with weekly semaglutide compared to lifestyle-only interventions (16.0% vs 5.7% respectively). However, evidence is limited regarding semaglutide use in primary care settings serving marginalized populations. Preliminary qualitative analysis suggests that providers are familiar with semaglutide for diabetes but engage in limited prescribing for obesity alone. Barriers include cost, insurance coverage, and lack of obesity care training. Additionally, patients face challenges with semaglutide initiation and adherence, such as medication shortages, fear of injections, preference for natural remedies, and gastrointestinal side effects. Findings from this ongoing study will guide future interventions for semaglutide and other anti-obesity medications in primary care settings, prioritizing marginalized populations. A future study will aim to use these findings to address challenges to semaglutide uptake by combining telehealth support and pharmacist assistance.  
**Pilot project:** Submitted grant for NIH R01

Creating a Clinical Pathway for Obesity Treatment through an EHR Clinical Decision Support Tool  
**PI:** Valy Fontil, MD, MAS, MPH; Arielle Elmaleh-Sachs, MD, MS; Co-Is: Isaac Dapkins, MD; Tenzin Desel, MD (resident)  
Studies show that the use of team-based care, clinical decision support tools, and patient engagement for self-efficacy can help to promote treatments and address clinical inertia in chronic disease management. This project aims to increase patient access to evidence-based obesity care through an obesity clinical decision support tool on Epic to facilitate opportunities for counseling, treatment and referrals for patients based on their weight; and to reduce average weight among patients who have obesity. After reviewing current national guidelines from a number of organizations, and working with an interdisciplinary working group at the FHC, a clinical decision support tool is being created to increase access to individualized obesity care through multi-faceted lifestyle, behavioral, pharmacologic and surgical interventions.  
**Funder:** HRSA and University of California San Francisco (UCSF) Catalyst Awards to Develop Therapeutics, Diagnostics, Medical Devices, Digital Health, and Biotools
Optimizing Virtual Care for the FHCs

**PI: Isaac Dapkins, MD; Antoinette Schoenthaler, EdD Co-Is: Arielle Elmaleh-Sachs, MD, MS; Valy Fontil, MD, MAS, MPH**

This 2-year project is developing, implementing, and evaluating innovative, evidence-based strategies to optimize virtual health to improve and deliver quality care access for the underserved. A community-oriented, primary care lens will be used for continuous quality improvement. Sustainable best practices will link patients to virtual care where they live and work, through enhanced virtual physical exams and remote patient monitoring. With this, clinical quality of care and chronic disease prevention and treatment will be much improved. Virtually establishing this patient-doctor relationship enables continuity of care and encouragement of in-person follow-up visits at the FHCs. This work is in close collaboration with the NYU MCIT Department of Health Informatics.

**Funder:** HRSA

The FHC Hepatitis B/D and Sexual Wellness Screening Initiative

**PIs: Sandeep Bhat, MD, MBA; Mitchell Caponi, MPH**

This project aims to better identify patients at risk for Hepatitis B/D, or other sexual health needs. To reduce stigma, all patients answer questions built into the Sexual Wellness survey via MyChart. Based on the patient’s responses, the provider orders appropriate screening for Hepatitis B/D, and refers high-risk patients for PrEP counseling and treatment. By identifying patients for treatment early, we will reduce mortality and morbidity of end stage liver disease. To date 7,920 tests have been completed, identifying 48 cases, and linking 39 individuals (81% of positive cases) to hepatologists for appropriate care. As the project continues to grow, an increasing number of patients are being screened and linked to hepatology for treatment.

**Funder:** Gilead Sciences, Inc.

Physical Activity Intervention to Prevent Weight Gain and Promote Mental Health

**PI: Stephanie Orstad, PhD**

The Green Activity Pilot (GAP) is a multiphase research project to optimize the use of safe and accessible urban greenspace to promote enjoyable and sustainable physical activity, prevent weight gain, and maximize the mental health benefits of spending time with others in nature. We aimed to identify socioecological barriers and facilitators to green physical activity in urban green spaces. Patients with a history of obesity were recruited from Sunset Park, Brooklyn FHC. In phase one, of the eight dimensions of wellness, the most prominent motivators to engage in green physical activity were physical, emotional, social and environmental. Our next phase will develop and test a mobile technology-assisted, group-based green physical activity intervention. Effective park-based physical activity interventions provide valuable resources to reduce disparities in obesity and mental health.

**Funder:** NIH KL2

The Creation of a Multidomain Neighborhood Environmental Vulnerability Index Across an Urban Center

**PIs: Jeanette Stingone, PhD, MPH; Stephen Uong, MPH Co-I: Alexander Azan, MD**

NYC researchers developed the Neighborhood Environmental Vulnerability Index (NEVI) to gauge area-level factors impacting health-related vulnerability to environmental exposures. Comprising 54 area-level features using data from 2015-2019 U.S. Census and 2020 CDC PLACES Project, NEVI has four domains: demographic, economic, residential, and health status. NEVI correlated with the Neighborhood Deprivation Index and Social Vulnerability Index and provided additional insight into vulnerability-contributing features. In NYC, neighborhoods displayed diverse vulnerability drivers. Some had none (low in all domains), others only had residential drivers like poor housing, and some had demographic, economic, and health status-related drivers, elevating their susceptibility to poor environmental health conditions like severe asthma. NEVI’s adaptability and theory-based construction offer detailed vulnerability metrics, enabling targeted research and public health interventions to reduce health impacts from environmental exposures.

**Funder:** Health Effects Institute (HEI), in collaboration with Columbia University’s Mailman School of Public, made possible by the Robert Wood Johnson Foundation (RWJF) to the NYC Department of Health and Mental Hygiene and the New York Academy of Medicine (NYAM)
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DGIMCI faculty are an integrated community of researchers who use a variety of approaches and methodologies to generate high-impact, federally funded research that advances both individual and population health. Our core areas of research include obesity, diabetes, substance use, medical education and emerging areas such as artificial intelligence (AI) in clinical settings.

Patient-Centered Research Highlights

**WOOP VA: Mental Contrasting with Implementation Intentions to Promote Weight Management in Primary Care**
**PI:** Melanie Jay, MD, MS

Mental Contrasting with Implementation Intentions (MCII) is a novel imagery technique that can motivate behavior change. MCII has proven to increase physical activity, consumption of fruits and vegetables, and exercise program attendance, but few studies have tested its effectiveness for weight management. This study will assess the efficacy and implementation of MCII for weight management by using “WOOP” (Wish, Outcome, Obstacle, Plan) combined with MOVE! for Veterans. We hypothesize that WOOP + MOVE! will lead to greater engagement in weight loss and management than MOVE! alone. We are excited to have enrolled 146/366 Veterans. We anticipate the intervention will be efficacious and increase Veterans’ engagement in weight management, leading to implementation and within primary care populations.

**Funder:** VA Health Resources and Services Administration Merit Review (1/1/2021 – 12/31/2025; $1,198,827)

**BRInging the Diabetes Prevention Program to Geriatric Populations (BRIDGE)**
**PI:** Jeannette Beasley, PhD, MPH, RD; Joshua Chodosh, MD

Nutrition plays a key role in diabetes prevention and is best addressed in the primary care setting due to the chronic nature of the disease. In its second year of a five-year NIH R01 grant randomized control trial, BRIDGE examines ways to increase access for older adults to support a healthy lifestyle, including eating habits, during pre-diabetes. The effectiveness and implementation of two delivery modes (virtual vs in person) of the CDC’s Diabetes Prevention Program have been adapted for patients aged 65 years and above. Our recruitment goal has been surpassed, enrolling over 90 participants. Two videos have been created: one for participants, and one for providers. We are partnering with FHCs at NYU Langone to expand BRIDGE with an initial focus on Spanish adaptation (FHC Faculty lead: Elaine De Leon, MD). Findings from this study will inform best practices in the delivery of an evidence-based intervention that has far reaching implications for older adults in the US with prediabetes.

**Funder:** NIH R01 (9/1/2021-8/31/2026; $4,232,819)
Sharing Patient Generated Health Data (PGHD) with Health Care Providers for Weight Management
Co-PIs: Melanie Jay, MD, MS; Anne Dembitzer, MD; Omar El Shahawy, MD, MPH, PHD
The VA telehealth initiative aims to enhance patient-centered care with a focus on utilizing Patient Generated Health Data (PGHD) to improve communication between VA providers and Veterans, especially in weight management. Over 40% of Veterans have obesity, making PGHD, like FitBit data, valuable for weight management. The FitBit Pilot Program (n=1636 veterans) showed feasibility and acceptance among Veterans. This project expands on the pilot, aiming to establish PGHD best practices for sharing weight management data. It involves assessing EHR and FitBit data, conducting focus groups, and interviewing the VA’s MOVE! Weight Management Program coordinators for insights to enhance PGHD utilization and maximize its impact in preventative health services. Initial findings from focus groups show positive FitBit experiences among Veterans, though setup and syncing issues arose. Participants also expressed hesitation about discussing shared data with VA providers. Coordinators highlighted FitBit’s accountability benefits for personalized care, suggesting wider care team involvement in PGHD discussions.
Funder: VA Office of Connected Care (1/1/2022-9/30/2023; $235,000)

Language Access and Health Literacy: Community and NYC Public Healthcare System Partnership
Co-PIs: Shonna Yin, MD; Andrew Wallach, MD; Bernard Dreyer, MD; Alexander Glick, MD; Carolyn Berry, PhD
A recent award from the Department of Health and Human Services will promote equitable access to language services and optimal preventive health services use among individuals with Limited English Proficiency (LEP). The program will work in 4 NYC Health+Hospitals sites (2 hospital-based [Bellevue, Woodhull] and 2 FQHC sites [Gotham/Belvis, Gotham/Roosevelt]). The close partnership and collaboration with community and health care stakeholders will develop, implement, and evaluate a health literacy-informed, culturally- and linguistically- sensitive approach to improve language access services for patients with limited English proficiency (LEP), promote health equity and reduce disparities in preventive health services use and health outcomes in New York City (NYC).
Funder: Department of Health and Human Services (9/30/2022-9/29/2025; $1,124,994)

Food Response Training Intervention for Weight-Management
PI: Sandra Wittleder, PhD
This study employs a computer-based food training program to manage weight in ethnically diverse adults with obesity, enrolling 60 participants over 12 weeks. It includes an introduction session, self-guided food response training, and weekly meetings to monitor adherence and answer questions. Data collected at the study’s start and end encompass energy intake, clinical data, and surveys, with 30 participants involved in interviews to assess the intervention’s feasibility, acceptability, and utility. Currently, 27 subjects are enrolled with 15 having completed the program. Initial analysis indicates strong adherence, with participants averaging four weekly food training sessions, exceeding the recommended three. On average, daily food intake decreased by 323 kcal over 12 weeks. These early findings indicate positive response and compliance with the intervention, providing a robust foundation for future research in food response training for diverse obese adults.
Funder: American Heart Association (5/1/2021-4/30/2023, with a no-cost extension)
Evaluation of Homeless Health Outreach and Clinical Services

Yinan Lan, MD, Medical Director of Homeless Health for NYC Health+Hospitals; Amanda K. Johnson, MD, MBA; Andy Cook, MHA

In January 2023, Health + Hospitals launched Street Health Outreach & Wellness Mobile Units (SHOW) and roving teams to aid the homeless. By July 2023, it facilitated 2,765 engagements, connecting them to care providers, addiction treatment, mental health services, and housing networks. Clinical care referrals are to the H+H Primary Care Safety Net (PCSN) Clinics. Among patients with at least one visit in a 6-month period, emergency room utilization decreased by 57% and inpatient stays by 67%. This shows the significant impact of the program in reducing the strain on emergency services and hospitals, and maintaining continuity of outpatient care. As more patients receive help, outpatient adherence is expected to rise while unnecessary ER visits and hospitalizations continue to decline, improving overall healthcare efficiency and support for the homeless population.

Funder: NYC Health+Hospitals

Trustworthiness of ChatGPT’s Medical Advice

Co-PIs: Devin Mann, MD; Oded Nov, PhD; William Small, MD; Nina Singh, BSc (Medical Student)

This study assessed the feasibility of using ChatGPT, an AI-based chatbot, for patient-provider communication. Participants were presented with healthcare-related questions, half of which were answered by a human healthcare provider and the other half by ChatGPT. Participants rated the trustworthiness of the responses. Overall, participants mildly trusted chatbot responses, with higher trust for logistical questions (e.g., scheduling appointments) and preventative care (e.g., vaccines). However, trust was lower for diagnostic and treatment advice. This study highlights the possibility that chatbots can assist in patient-provider communication for administrative tasks and common chronic disease management. Yet, further research is needed before integrating them into more clinical roles.

Funder: NYU Langone Health, Healthcare Innovation Bridging Research, Informatics, and Design (HiBRID) Lab

In Person vs Virtual Health at 5 NYC/H+H Clinics

PIs: Sondra Zabar, MD; Andrew Wallach, MD; Kathleen Hanley MD; Co-Is: Ross Kristal, MD; Kevin Chen, MD; Hannah Jackson, MD; Colleen Gillespie, PhD; Lisa Altshuler, PhD

Utilizing standardized clinical scenarios, trained actors simulate “new patients” in telemedicine and in-person visits to assess the entire care process, including preparation (e.g., access to technology and patient portal), the visit (e.g., communication), and post-visit follow-up, documentation, and continuity of care. Across four NYC public hospitals, 29 visits occurred (14 in-person, 15 virtual), with a fifth location being added. Care teams received high ratings for professionalism and communication. Unannounced Standardized Patients (USP) positively rated (100% satisfaction), recommended the clinic, and were treated professionally by clerical staff, patient care assistants, and clinicians. However, telemedicine communication skills scored slightly lower than in-person visits, lacking certain screenings like PHQ-2 for depression. USP visit data will inform care teams and leadership, while ongoing qualitative data collection focuses on improving telehealth practices. This comprehensive method aims to optimize patient experiences and telehealth procedures.

Funder: NYC Health+Hospitals
Education and Training Research Highlights

Does Implicit Bias Influence Medical Decision-Making?
**PI: Cristina Gonzalez, MD, MEd**
Implicit, or unconscious, bias may influence physician behaviors when they communicate with patients or make medical decisions. Current efforts to train physicians to counter this bias lack measurable outcomes to gauge effectiveness. This project aims to create and validate outcome metrics for physician behavior, assessing the influence of implicit bias on medical decision-making. Initial data validated an experimental model. Physicians scored lower in communication with Black SPs as compared to White SPs and physician racial implicit bias correlated with poorer medical decision-making with Black SPs. This model offers a means to assess the efficacy of skills-based interventions in managing implicit bias. This work addresses a crucial gap in Implicit Bias Recognition and Management studies.

**Funder:** NIH K23 (12/15/2022-5/31/2024; $259,029)

SubstAnce Use Research Education and Training (SARET)
**PI: Marc Gourevitch, MD; Co-I: Kathleen Hanley, MD**
The inter-professional SARET program has fueled dental, medical, nursing, social work, and global public health students’ passion for substance use (SU) research by engaging in stipend-supported mentored research, weekly seminars, site visits, and an online curriculum. One hundred sixty-six students have participated, with a majority stating that the program increased their interest in SU research. They’ve published 99+ articles in peer-reviewed journals. SARET has been immensely valuable in supporting SU research and positively impacting students’ attitudes towards it. In addition, a Visiting Mentor Development Program further enhances faculty expertise nationwide.

**Funder:** NIH R25 National Institute on Drug Abuse (01/01/2007-04/01/2027)

Enhancing PrEP Knowledge and Use Among GYN Providers
**PI: Robert Pitts, MD; Co-Is: Richard Greene, MD, MHPE; Melinda Katz, MD**
Cisgender women and transgender men face disparities in PrEP eligibility assessment, prescription, and retention in PrEP care. A pilot PrEP education intervention targeted obstetrics/gynecology healthcare providers (HCPs) serving these groups. Three sessions covered eligibility and counseling, formulations and adherence, and prescription and assistance programs. Pre- and post-intervention surveys gauged HCP knowledge and barriers. Among 49 participants, 8.7% had PrEP training; 61.2% felt very/somewhat uncomfortable prescribing PrEP pre-intervention. Post-intervention, improvement was seen in knowledge of contraindications, eligibility, follow-up, and assistance. HCPs noted barriers: lack of a PrEP navigator, culturally appropriate materials, and integrated EHR content. EHR prompts for PrEP screening, medication monitoring, and telehealth for follow-up could bolster prescription.

**Funder:** NYU Global Public Health (11/1/2019-10/31/2023)
### Collaborative Grants and Faculty-Initiated Projects

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<td>Facing the Challenges of Chief Year: A Standardized Experiential Simulation Curriculum (Department funded)</td>
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<tr>
<td>Mia Minen, Julia Adamian</td>
<td>RELAXahEAD: A Behavioral Approach to Remote Migraine Management in Primary Care (NIH R01)</td>
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<td>Joshua D. Lee, Barbara Porter, Sapan Shah</td>
<td>Addressing the U.S. Opioid Epidemic in Incarcerated Adults: Long-Acting Buprenorphine vs. Naltrexone Opioid Treatments in Criminal Justice System-Involved Adults (NIH U01)</td>
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<tr>
<td>Joshua Lee, Caitlin Driscoll</td>
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<td>Rajesh Vedanthan, Amanda Klinger, Sondra Zabar</td>
<td>Tamale Education and InnovAtion Center for Health Professionals (TEACH) to Strengthen Healthcare Delivery in Northern Ghana Foundation (Helmsley Charitable Trust Foundation; partnership with NYULH, the University for Development Studies School of Medicine, and Tamale Teaching Hospital in Ghana)</td>
</tr>
<tr>
<td>Lorna Thorpe, Brian Eibel, Stephanie Orstad</td>
<td>Component A: Impact of Community Factors on Geographic Disparities in Diabetes and Obesity Nationwide (CDC, National Center for Chronic Disease Prevention and Health Promotion)</td>
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<tr>
<td>Nadia Islam, Jeannette Beasley</td>
<td>Understanding Health Disparities in Pakistani, Bangladeshi And Asian Indian Immigrants: The Role of Socio-Cultural Context, Acculturation and Resilience Resources (NIH R01)</td>
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<tr>
<td>Scott Braithwaite, Robert Pitts</td>
<td>PrEP-3D: Compare the Effectiveness of a Newly Created PrEP-3d App to Standard of Care for People Starting and Continuing PrEP, and Adherence to PrEP (NIH R01 with UCSF)</td>
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<td>Scott Braithwaite, Irene Swanenberg, Jessica Tannenbaum</td>
<td>Can a Radical Transformation of Preventive Care Reduce Mortality by 20% in Low SES Populations (NIH R34)</td>
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<td>Lu Hu, Jeannette Beasley</td>
<td>Integrating Cultural Aspects into Diabetes Education (American Diabetes Association)</td>
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<td>Scott Sherman, Stephanie Orstad</td>
<td>Virtual Care CORE Congressionally Mandated Evaluation of All Telehealth Service Modalities at the VA (VA HSRD, Office of Connected Care)</td>
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<tr>
<td>Lorna Thorpe, Natasha Williams, Donna Shelley, Andrew Wallach</td>
<td>NYC Public Housing Residents COVID-19 Response (NYCHA RCR): A Supplement to Evaluation of Smoke-Free Housing Policy Impacts on Tobacco Smoke Exposure and Health Outcomes (NIH R01)</td>
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<tr>
<td>Lorna Thorpe, Natasha Williams, Donna Shelley, Andrew Wallach</td>
<td>Community-Engaged Research to Improve 2019 Coronavirus Disease (COVID-19) Testing for New York City Housing Authority (NYCHA) Residents (NIH RADx-UP)</td>
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<tr>
<td>Farzana Kapadia, Robert Pitts</td>
<td>Ending the HIV Epidemic – PrEParing Patients and Providers (University Research Challenge Fund NYU)</td>
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<td>Meena Sigireddi, Julia Adamian, Devin Mann</td>
<td>Broadening the Reach, Impact, and Delivery of Genetic Services Study (NIH U01; subcontract with University of Utah)</td>
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<td>Stacy Loeb, Stephanie Orstad</td>
<td>Lifestyle Modification in Patients with Prostate Cancer (NYS DOH)</td>
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<tr>
<td>Stuart Katz, Rachel Gross, Leora Horwitz, Andrea Troxel, Jeannette Beasley</td>
<td>Post-Acute Sequelae of SARS-CoV-2 Infection Initiative: NYULH Clinical Science Core, Data Resource Core, and PASC Biorepository Core – NIH RECOVER (NIH OT2)</td>
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<tr>
<td>John Rotrosen, Ben Eckhardt, Mathew Kladney, Alexandra Goodwin, Ann Winters</td>
<td>Optimizing Pharmacotherapy Strategies for Opioid Use Disorder: Individual Level Predictive Modeling of Opioid Use Disorder Treatment Outcome (NIH, HEAL initiative)</td>
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<td>John A. Dodson, Natalie Levy, Kathleen Hanley</td>
<td>BETTER-BP (Behavioral Economics Trial to Enhance Regulation of Blood Pressure) (NIH R01)</td>
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<td>Jeffrey S. Berger, Natalie Levy</td>
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<tr>
<td>Joshua Chodosh, Lisa Altshuler, Sondra Zabar</td>
<td>Engagement in Longevity and Medicine (ELM) Research Collaborative (NIH R24)</td>
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<tr>
<td>Kevin Eaton, Kevin Hauck, Katherine Hochman, Julia Adamian</td>
<td>Telehealth Training in Transitions of Care Management (NYULH Quality Initiative)</td>
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<tr>
<td>Saul Blecker, Julia Adamian</td>
<td>Addressing Antihypertensive Medication Adherence through EHR-Enabled Teamlets in Primary Care (NIH R01)</td>
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<tr>
<td>Robert Pitts, Sahnah Lim, Scott Braithwaite</td>
<td>Assessing Facilitators and Barriers to Care for PrEP Among Heterosexual Men Seeking Care at H+H/Bellevue Implementation of Long Acting PrEP at H+H/Bellevue (EquiPrEP) (Gilead)</td>
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<tr>
<td>Ofole Mgbako, Robert Pitts</td>
<td>EquiPrEP: Implementation of Long-Acting Injectable HIV Pre-Exposure Prophylaxis Utilizing an Equity Framework (NYC Health+Hospitals)</td>
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<tr>
<td>Andrew Wallach, Mike Bouton</td>
<td>UCSF/NYC Health + Hospitals COVID-19 Syndromic Surveillance (Bill and Melinda Gates Foundation)</td>
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<tr>
<td>Robert Pitts, Michael Phillips</td>
<td>Assessment of Risk Factors Associated with Outpatient Parenteral Antimicrobial (OPAT) (TULA NYU Medical School Scholarship)</td>
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<tr>
<td>Robert Pitts</td>
<td>COVID-19 Infections Among LGBTQ Patients Accessing Care at HHC (NYC Health+Hospitals)</td>
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<tr>
<td>Mark Adelman, Lisa Altshuler</td>
<td>Virtual Reality Simulation Training for the Management of Tracheostomy Emergencies (CHEST Foundation)</td>
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<tr>
<td>Emily Haas, Stephanie Orstad</td>
<td>Development and Evaluation of a PPE Implementation Guide to Support Frontline Worker Wellbeing</td>
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<tr>
<td>Hannah Jackson, Andrew Wallach, Mohan Thanikachalam</td>
<td>ViTrack: Wearable, Accurate, Continuous Blood Pressure Monitor to Improve Outcomes in Hypertensive Diseases of Pregnancy (NIH R44)</td>
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<tr>
<td>Susan Buchbinder, Robert Pitts</td>
<td>PrEP-3D, An Integrated Pharmacy Digital Diary and Delivery Strategy to Increase PrEP Use Among men who have sex with men (NIH R01, subcontract with UCSF)</td>
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### SELECTED PUBLICATIONS


**Nov O, Singh N, Mann D.** Putting ChatGPT’s Medical Advice to the (Turing) Test: Survey Study. JMIR Med Educ. 2023;9:e46939


 CONTRIBUTING TO THE NATIONAL AGENDA IN MEDICAL EDUCATION

This year, DGIMCI faculty were awarded four new grants from Association of American Medical Colleges (AAMC), Josiah Macy Jr. Foundation, New York Academy of Medicine (NYAM) and AQA Honor Medical Society, nationally recognized medical education foundations. Our faculty lead the way in medical education innovation with expertise in performance-based assessment, simulation, professional identity formation, curriculum development and clinical decision making.

Using Simulation to Improve Telehealth Skills in Primary Care at all Development Levels

Co-PIs: Sondra Zabar, MD; Colleen Gillespie, PhD; Lisa Altshuler, PhD; Kathleen Hanley, MD

Between 2023 and 2025, PrMEIR researchers will use SP checklist data from Objective Structured Clinical Examinations (OSCE), Unannounced Standardized Patients (USP), and Announced Standardized Patients (ASP) cases to design competency-based education simulations, assessments, and toolkits to improve telehealth practice at undergraduate, graduate, and continuing medical education (UME, GME, and CME) training levels. The team plans to tap into data from around 70 cases to compare performance longitudinally, across the continuum, across different telemedicine cases, as well as to compare in-person vs. virtual performance on cases that were conducted in both modalities. This will allow the interdisciplinary team to identify best practices for telemedicine communication skills and develop targeted learning initiatives. Six additional schools received this grant (Henry Ford Health, Kaiser Permanente, Medical College of Georgia, Stanford, Stony Brook, Weill Cornell).

Funder: AAMC (3/1/2023-2/28/2025)

When Patients Discriminate: A Trainee-Driven, Co-Created Simulation Curriculum

PI: Christian Torres, MD; Co-Is: Richard Greene, MD, MHPE; Barbara Porter, MD, MPH; David Morales, MD; Sondra Zabar, MD

Researchers are developing a program to address discrimination experienced by trainees who are underrepresented in medicine (URiM) or hold other minoritized identities in the clinical learning environment. Building upon previous work to support house staff and faculty in addressing incidents of discrimination, this program focuses on practice and assessment of skills. House staff are paired with faculty in their respective departments to co-develop and build a bank of Objective Structured Clinical Exam (OSCE) cases as practical teaching and assessment tools. The team has collaborated with First Night on Call (FNOC), an experiential patient safety orientation for incoming interns, to add an OSCE that incorporates a biased comment from a patient. Nearly 95% of the 200+ participants reported an improvement in their ability to respond to bias in the workplace after participating and debriefing in a focused simulation activity. Ultimately, researchers plan to package and disseminate the program to be used individually or collectively at other institutions.

Funder: Josiah Macy Jr Foundation (2/1/2023-1/31/2024)
Developing a Virtual Standardized Patient Program to Teach and Assess Trainees' Clinical Skills

**PI:** Daniel Sartori, MD; **Co-I:** Rachael W. Hayes, MD

The rapid shift to virtual care has created a learning gap for our trainees. As educators, we lack knowledge on teaching and assessing virtual care practices, including virtual history-taking, remote exams, and ‘digital empathy.’ Our program, launched in July 2023, will use in situ simulation, replicating real clinical encounters in resident clinics themselves, to train residents. Initially, standardized patients (SPs) will give feedback and assess telemedicine skills. In the second phase, “unannounced” SPs will mimic real patients, evaluating the virtual clinic microsystem discreetly. This approach will bridge the knowledge gap and develop a comprehensive educational program for virtual care.

**Funder:** NYAM, Barondess Fellowship (7/1/2023-6/30/2025)

Professional Identity Formation (PIF)

**Lynn Buckvar-Keltz, MD,** Director of the Professionalism Curriculum and NYUGSOM were recognized for the PIF curriculum that supports our medical students’ growth in becoming professionals as it evolves during medical school and beyond. This award will support programmatic evaluation of our curriculum. NYUGSOM was among a select group of eight medical schools invited to participate in this year’s Millennium Conference where the theme was *Professional Identity Formation: Evolving Concepts of Professionalism for Physicians in a World with Pandemics and Social and Political Upheaval.*

**Funder:** AΩA Professionalism Award

Impact of Faculty Leadership Development Program (FLDP) for Underrepresented in Medicine (URiM)

**PI:** Richard E. Greene, MD, MHPE; **Co-I:** Joseph Ravenell, MD

The NYU FLDP was created to provide support, mentorship, and professional development to URiM junior faculty. Three cohorts (N=41) have completed the program, consisting of six, two-hour workshops. An overwhelmingly successful element of the FLDP was having a place to connect and build a community. Non-URiM faculty and leaders, with an interest in advancing diversity, mentoring, sponsoring, or coaching, were paired with URiM faculty participants. With this experience, sixteen URiM faculty were promoted to leadership roles, and four received faculty promotions. A qualitative analysis is in progress to understand if institutional context matters in the experiences and opportunities for URiM faculty.

**Funder:** Medical College of Wisconsin, Kern Institute Medical Education Transformation Collaboratory, in collaboration with UCSF (7/1/2021-6/30/2023)

Automated Assessment of Clinical Reasoning (CR)

**PI:** Verity Schaye, MD, MHPE; **Co-I:** Jesse Burk Rafel, MD

This project analyzed trends in 302 residents’ CR documentation quality using a machine learning model among 12,605 general medicine admissions over four academic years. CR documentation quality was lower depending upon the clinical learning environment, such as day shift (vs night), volume of admissions, and the COVID-19 surge. One hypothesis is that quality was higher during the night shift as residents can focus on new admissions, with fewer non-emergent care responsibilities. Similarly, the higher quality among interns may correlate with fewer team management responsibilities and admissions. Furthermore, note quality showed improvement across the four-year academic period, potentially linked to increased resident teams and reduced team caps.

**Funder:** National Board of Medical Examiners Stemmler Grant (7/1/2022-6/3/2024)
Center for Empathy in Medicine

Jennifer Adams, MD, is the inaugural Director of the Center for Empathy in Medicine at the Institute for Innovation in Medical Education (IIME). The Center aims to define best practices in empathy education and training through a rigorous program of research that will advance our understanding of the impacts of empathy as a core value and skill within health professions training and health care delivery. Led by Dr. Colleen Gillespie, the IIME Director of Education Quality and PrMEIR Director of Evaluation and Assessment, researchers are developing a comprehensive program of assessment of empathy skills across the UME-GME continuum that will become a national standard for informing and evaluating empathy education and training.

The Center for Empathy in Medicine has presented the following Pilot Research at National Conferences

• Medical students’ empathy over time and association with core clinical skills.
• Incoming medical students’ empathy orientation: Baseline empathy, association with initial clinical skills and effects of empathy session on overall clinical skills.
• Using an animated film to foster understanding of and engagement in addressing implicit bias through empathy across the healthcare continuum.
• Are resident physicians’ abilities to recognize and respond to emotions associated with effective education and counseling in Covid vaccine hesitancy?

SELECTED PUBLICATIONS


Lypson ML, Gonzalez CM, Thompson PY. Repaving the Pathway to Prevent the Loss of Students with Marginalized Identities-Medical Student Attrition. JAMA internal medicine. 2022:182(9):924-925.


Hassan IF, Gorski V, Sanderson D, Braganza S, Benfield N, Nadas M, Amursi E, Gonzalez C. Consensus on Social Determinants of Health Knowledge Topics and Behavior Learning Goals Across Primary Care Residencies: Results of a Delphi Study. Academic Medicine 2023 Aug 1;98(8):941-948.

NYU Langone’s Program for Medical Education Innovations and Research (PrMEIR) brings together a cross-functional community of practice, consisting of highly skilled clinicians, educators, psychologists, and biostatisticians to stimulate innovation and research on education of physicians and other healthcare professionals. Established in 2006 as part of the DGIMCI, the program’s mission is to advance medical education scholarship and institute best practices to support patient-centered, evidence-based medical education. Our curricular innovations, faculty development programs and research projects strengthen the link between healthcare professional training and patient health outcomes and wellbeing.

**Sondra Zabar, MD** is the Director of PrMEIR, with over two decades of experience implementing and evaluating performance-based assessment for all levels of learners. Her work centers on establishing an evidence base for the effectiveness of innovations in educational practice and using performance-based assessment for individual training and health system change. Her research portfolio includes leadership and collaborations of multiple NIH and foundation grants. Dr. Zabar is a nationally renowned educator and scholar of the processes and outcomes of medical education.

**Colleen Gillespie, PhD** is a translational researcher and the Director of Evaluation for PrMEIR. She is a trained social scientist with interests in medical education and program evaluation research. She focuses on the use of rigorous educational assessment methods including assessment of clinical performance and practice to advance medical education as a discipline and enhance its effectiveness in preparing physicians for the challenges of primary care practice.

**Lisa Altshuler, PhD** is the Associate Director of Evaluation & Assessment. She focuses on the development, organization and management of data and data collections including the Database for Research on Education in Academic Medicine (DREAM). She collaborates with medical, nursing and other health professional educators to develop best practices for team communication and collaboration models that promote safety and improve patient outcomes.
Research on Medical Education Outcomes (ROMEO) Unit

This rich interdisciplinary collaboration has resulted in the development of the Educationally Sensitive Patient Outcome (ESPO) Theoretical Model, which identifies important health outcomes tied to a healthcare provider’s level of experience and skill. The framework has become a model for medical education researchers around the world. To accomplish this, we created the Database for Research on Academic Medicine (DREAM), a Framingham-style, longitudinal database consisting of educational assessment and performance data accumulated over the course of educational participation at NYUGSOM. Data has been collected for more than 10 years from over 3,000 medical students, residents, fellows and practicing physicians.

To date, researchers have implemented 70 studies that assess relationships between medical school and training curricula, provider competency, skills development, the transfer of skills to practice and the effects of education on patient outcomes.

In close partnership with Drs. Adina Kalet and Tavinder Ark at the Kern Institute at the Medical College of Wisconsin (MCW), DREAM researchers at NYUGSOM have begun the process of linking data collected from 2009-present, from 42 unique datasets, during two formative UME simulations (Introductory Clinical Exam and Comprehensive Clinical Skills Exam) and data collected during GME training (annual OSCE simulations and unannounced standardized patient visits).

This year we shared six oral presentations and seven posters across four national and international conferences and published a manuscript on profiles and characteristics of 1100 learners using latent profile analysis. In our current phase of research, we are analyzing cohort differences from 2009-present and are exploring longitudinal skill development over training, with the ultimate goal of linking UME assessments with GME training and practice. Findings will inform future curricular reform and guide educational efforts at the institution.
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<tr>
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<tr>
<td>Jennifer Adams, MD</td>
<td>Associate Professor, Department of Medicine, Director, NYU Langone Center for Empathy</td>
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<tr>
<td>Kathleen Hanley, MD</td>
<td>Associate Professor, Department of Medicine, Associate Director, Primary Care Internal Medicine Residency Program Curriculum Director, Substance Abuse Research Education and Training</td>
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<tr>
<td>Laura Penalo, PhD, RN, CNL, CHSE</td>
<td>Health Professions Director, NYSIM</td>
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<tr>
<td>Joanne Agnant, MD</td>
<td>Clinical Associate Professor, Ronald O. Perelman Department of Emergency Medicine and Department of Pediatrics Associate Program Director, Pediatric Emergency Medicine Fellowship Associate Medical Director, New York Simulation Center (NYSIM)</td>
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<tr>
<td>Rachael Hayes, MD</td>
<td>Assistant Professor, Department of Medicine, Director, Family Health Centers at NYU Internal Medicine Residency Program</td>
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<tr>
<td>Jesse B. Rafel, MD</td>
<td>Assistant Professor, Department of Medicine, Assistant Director UME-GME Innovation, IIME</td>
</tr>
<tr>
<td>Tavinder Ark, PhD</td>
<td>Director, Data Science Lab, Kern Institute, Medical College of Wisconsin</td>
</tr>
<tr>
<td>Melanie Jay, MD, MS</td>
<td>Associate Professor, Departments of Medicine and Population Health Director, Research Collaboration and Mentoring Program Director, General Internal Medicine Fellowship Co-Director, NYU Langone Comprehensive Program on Obesity Co-Lead (Research), Beyond Bridges</td>
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<td>Clinical Associate Professor, Department of Pediatrics</td>
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<td>Cristina Gonzalez, MD, MEd</td>
<td>Professor, Department of Medicine, Co-Director (Medical Education), Beyond Bridges Associate Director, Medical Education, IEHE</td>
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<td>Abigail Winkel, MD, MHPE</td>
<td>Professor, Department of Obstetrics and Gynecology, Assistant Director, Education Scholarship, IIME Assistant Director, MHPE Program Vice Chair, Education for Obstetrics and Gynecology</td>
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<td>Abigail Winkel, MD, MHPE</td>
<td>Professor, Department of Obstetrics and Gynecology, Assistant Director, Education Scholarship, IIME Assistant Director, MHPE Program Vice Chair, Education for Obstetrics and Gynecology</td>
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<tr>
<td>Richard Greene, MD, MHPE</td>
<td>Professor, Department of Medicine, Associate Director, Primary Care Internal Medicine Residency Program Director, Health Equity Education</td>
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<tr>
<td>Caroline Paul, MD</td>
<td>Associate Professor, Department of Pediatrics, Affiliate Faculty Member, IIME</td>
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ROMEO Members
PrMEIR Research Highlights

Night-on-Call Immersive Simulation Across Consortium Schools

Co-PIs: Sondra Zabar, MD; Adina Kalet, MD; Tavinder Ark, PhD

Created by Drs. Zabar and Kalet and colleagues in 2016, 1,620 learners have completed the immersive Night-on-Call (NOC) multi-station simulation to-date, where graduating medical students prepare for residency by participating in a simulated night on call experience, while interacting with standardized assessors. Through a grant from the Macy Foundation, a consortium of ten medical schools was created to adapt customizable clinical cases, establish performance benchmarks, develop variations of learning environment across platforms, and study readiness-for-internship on a large scale. Learners are assessed on all 13 AAMC’s Core Entrustable Professional Activities for Readiness for Residency.

Near graduating students’ (n=864) data from 7 consortium members was analyzed. Researchers noted that students have strong basic patient communication skills. Overall, some students need improvement on education and counseling, interprofessional communication, focused history gathering, performing physical exam and skills related to evidence-based medicine and clinical reasoning. NOC can provide actionable, specific feedback to individual students and aggregate data to medical schools and residency programs that may guide educational strategies that ensure patient safety and effective training early in residency.

Over one hundred people joined the Consortium’s first conference in the Spring 2023, with Dr. Holly Humphrey, President of the Josiah Macy Jr. Foundation as the Keynote Speaker, followed by a Preparing for Transitions Panel and five presentations by consortium members. The group will build upon their membership and those wanting to learn more at the November Consortium Update at the AAMC Learn Serve Lead Meeting.

Funder: Josiah Macy Jr Foundation subcontract with Medical College of Wisconsin
Wise-OnCall: Online Educational Modules to Improve Readiness for Internship
Co-PIs: Lynn Buckvar-Keltz, MD; Jeffrey Manko, MD; Co-Is: Sondra Zabar, MD; Lisa Altshuler, PhD; Christine Beltran, EdM; Mary Ann Hopkins, MD; Michael Nick; Soma Roy; Emery Olson
Since 2017, NYUGSOM has been providing all incoming interns access to 12 online educational modules [WISE-OnCall (WOC)] prior to commencing their residency to review clinical content related to patient assessment and management at the bedside and patient safety. Researchers have been studying whether and why trainees found these modules helpful in their preparation for residency. For example, across 2018-2022 (n=945 interns), 87% of interns agreed that the WOC modules increased their readiness for internship while 88% of interns agreed that the WOC modules provided them with a framework to organize clinical information during orientation. The study team will continue to evaluate the quantity of modules, immediate and long-term impact and value of the modules for future cohorts, and plan to integrate the modules into other learning opportunities at NYUGSOM, such as Internal Medicine Clerkship or Night OnCall.

Reported Exposure and Comfort with Patient Safety Behaviors Continues to Be Low: Our 5-Year Survey
Co-PIs: Lynn Buckvar-Keltz, MD; Jeffrey A. Manko, MD; Sondra Zabar, MD; Co-Is: Christine Beltran, EdM; Deepak Pradhan, MD; Donna Philips, MD; Joanne Agnant, MD; Katie Tame, MS; Brielle Blatt, MPA
Incoming interns have diverse experiences and exposure to patient safety practices prior to residency and lack a shared understanding of what safety behaviors are expected of incoming interns. This can make transition to residency more challenging for interns, faculty, and leadership. NYUGSOM’s First Night on Call (FNOC) orientation targets these challenges by cultivating incoming intern readiness to address common patient safety issues and establishing a culture of safety. Analyzing entrance survey data from 990 interns over five years from 2018-2022, a mere 27% had prior formal patient safety education before FNOC. Few reported having encountered safety incidents like witnessing a medical error (38%), escalating situations (19%), or reporting errors (5%). While 56% felt comfortable escalating to supervisors, only 34% were comfortable reporting errors. Many participants (75%) learned how to do a structured handoff, with only 48% feeling comfortable using the tool. During COVID-19 (2020-2021), interns’ PPE proficiency rose slightly as did comfort caring for COVID patients. The fact that interns’ level of previous experience and comfort with patient safety behaviors remains suboptimal year to year reinforces the importance and value of FNOC as it offers interns the opportunity to gain experience and comfort in these areas. Integrating FNOC into residency orientation fosters a safety-focused community and culture, prioritizing patient safety.

Spaced Repetition OSCES with Transgender Patients Improves Performance
Co-PIs: Rachael Hayes, MD; Kelly Crotty, MD, MPH; Jennifer Adams, MD; Kevin Hauck, MD, MPH; Ruth Crowe, MD, PhD; Co-Is: David Kudlowitz, MD; Karin Katz, MD; Colleen Gillespie, PhD; Sondra Zabar, MD; Richard E. Greene, MD, MHPE; Caleb LoSchiavo, MPH; Christine Beltran, EdM; Jeffrey Wilhite, MPH
Residents’ confidence in caring for transgender patients is limited, revealing a training gap. This study assessed if early exposure to transgender health skills in medical school influenced residents’ competence during training. The 101 participants included NYUGSOM graduates with prior transgender OSCE experience and new learners. NYUGSOM graduates received better ratings from standardized patients (SPs), were deemed professional or completely professional, and excelled in overall gender-affirming care skills. SPs provided feedback to new learners about lack of experience with transgender patients, missed opportunities to inquire about gender identity, and the need to foster SP comfort and proper language use. Residents found the case valuable, appreciating interactions with transgender patients and practicing non-gendered language. Early exposure to transgender OSCEs enhances physician skills for transgender patient interactions.
Using Standardized Patients to Assess and Train Clinicians in Digital Communication and Use of Technology

Co-PIs: Anne Dembitzer MD; Melanie Jay, MD Co-Is: Lisa Altshuler, PhD; Sondra Zabar, MD

The transition to telehealth during the COVID-19 pandemic revealed a lack of preexisting telehealth training for clinicians. We sought to explore if Announced Standardized Patients (ASPs) can be used to assess and provide feedback to clinicians in a remote setting. Cases (hypertension and hearing loss) were designed and ASPs were sent to 60 residents (PGY1-3) and 16 faculty clinicians (n=76) at Manhattan Veterans’ Affairs Primary Care clinic from 2021-2022. On aggregate, participants scored relatively low on telehealth and patient activation skills (38% and 48% well done, respectively). Eighty-eight percent of participants found the program to be beneficial for practicing their skills. Findings suggest that ASPs can be used in virtual clinic settings to assess and provide detailed feedback on clinicians’ communication, telehealth, and clinical care skills.

Funder: VA Office of Connected Care

Point of Care Ultrasound (POCUS) Course for Internal Medicine Residents

Co-PIs: N. Caroline Srisarajivakul-Klein, MD; Michael Janjigian, MD

As part of the evaluation of our overall POCUS Program, a 3-case OSCE was developed to assess internal medicine PGY-2 residents’ (n=37) point-of-care ultrasound (POCUS) skills in lung, cardiac, abdomen, and lower extremity vasculature, 9-12 months following the initial course. They obtained images from standardized patients and identified abnormalities, providing differential diagnoses and management plans. Most residents correctly performed all views and achieved adequate abdomen images, but struggled with cardiac and lung. Only 65% scanned both lungs in the dyspnea case, with half generating a broad differential. The OSCE shows that PGY-2 IM residents can learn POCUS, but need clinical integration instruction for improved competency.

Funder: The Goodman Family Foundation

Mpox Simulation: A Nimble Educational Tool during an Emergent Public Health Outbreak

Co-PIs: Andrew Wallach, MD; Katherine Hochman, MD; Julia Adamian, MD; Renee Heller, Sondra Zabar, MD

When New York State and City declared a public health emergency for mpox (formerly known as monkeypox) in July 2022, symptoms, testing, vaccination, and treatment were all unfamiliar to most healthcare workers. To offer "just-in-time" education, we included a simulation case with a standardized patient (SP) concerned about mpox in our fall 2022 experiential onboarding program for new faculty. Participants scored highly on communication domains, but not as well in the domains of education and counseling. SPs rated clinicians 71% well done across patient satisfaction items, but only 41% well done on patient activation items. After the simulation practice and group debrief, 95% of participants felt more confident addressing mpox concerns, demonstrating the effectiveness of targeted simulation education during emergent public health issues. Results from this work were presented during an oral presentation at the Society of General Internal Medicine national meeting. In fall 2023, a new case will focus on poor air quality recommendations. Since 2017, 227 faculty have participated in this onboarding program to prepare newly hired clinicians.

Funder: DGIMCI Philanthropy
Building the Foundation for Precision Medical Education
Each year, PrMEIR awards funds to individuals with promising impact on medical education. This year we collaborated with Drs. Triola and Burk Rafel of IIME to focus on Precision Medical Education (PME), an emerging paradigm to achieve competency-based medical education and lifelong learning. It leverages data and technology for personalized assessments and feedback loops, and targeted educational resources, enabling growth across the training continuum. We had 11 submission from across the NYUGSOM and funded five projects.

The Murray J. Berenson, MD Grant in Medical Education Research Sponsored Projects:

Resident and Faculty Perceptions of Educational Nudges on the Educational Value of Clinical Experiences
**PI:** Dr. Omar Moussa
**Co-PIs:** Dr. Marc Triola & Dr. Daniel Sartori
*Department of Medicine*
Nudges are targeted, personalized educational prompts composed of evidence-based resources. This study will assess the perceived educational value of these “nudges” from first-year medical residents at NYU’s Brooklyn and Manhattan campuses.

Social Network Analysis of Inpatient Communication Networks to Enable Precision Medical Education
**PI:** Dr. William Small
**Co-PI:** Dr. Jesse Burk Rafel
*Department of Medicine*
Social network analysis (SNA) can demonstrate how individuals within healthcare teams are connected and quantify their influence within a network. This study will describe patterns that emerge when performing SNA on the secure messaging networks of inpatient medical trainees to inform feedback conversations about the impact of trainees’ inter-professional collaboration behaviors.

The Anthony J. Grieco, MD Grant in Medical Education Research Sponsored Projects:

Towards Precision Medical Education: How Internal Medicine Residents Learn from Clinical Practice
**PI:** Dr. Carl Drake
**Co-PI:** Dr. Daniel Sartori
*Department of Medicine*
The goal of this research is to investigate what residents do to transform their workplace experiences into personal learning opportunities. This qualitative study seeks to answer research questions to refine educational informatics approaches and to inform precision medical education for residents.

Developing Personalized Clinical Experience Profiles for Emergency Medicine Residents: Leveraging Electronic Health Record Data to Inform Curricular Innovation
**PIs:** Drs. Nicholas Genes & Selin T. Sagalowsky
**Co-PIs:** Dr. Eduardo Iturrate, Dr. Anneli von Reinhart, & Dr. Joseph Offenbacher
*Department of Emergency Medicine*
This project will develop and validate a crosswalk tool that maps emergency department visits to the Model of the Clinical Practice of Emergency Medicine and drive feedback, coaching, and evidence-based curricular changes.

Exploring Precision Reporting Methods for Enhancing Resident and Faculty Assessment of Medical Student Performance in the Clinical Clerkships
**PI:** Dr. Verity Schaye
**Co-PIs:** Dr. Michael LoCurcio, Nikola Koscica, Ilan Reinstein, Chloe Holt-Reiss, & Zachary Hill-Whilton
*Department of Medicine*
Through iterative cycles of refinement and eliciting of feedback, the aim of this project is to produce a report to share with faculty and resident assessors that will be effective in promoting changes in assessors’ patterns of Workplace-Based-Assessment completion.
SELECTED PUBLICATIONS


Winkel AF, Gillespie C, Park A, Branzetti J, Cocks P, Greene RE, Zabar S, Triola M. Bridging the Gap from Student to Doctor: Developing Coaches for the Transition to Residency. Medical education online. 2023:28(1).


ADVANCED TRAINING AND PROFESSIONAL DEVELOPMENT

DGIMCI Faculty play key roles in these advanced training programs with research at their core.

**Mentoring the Next Generation of Trainees in Patient-Oriented, Community Engaged Research in Obesity and Health Equity**

**PI: Melanie Jay, MD, MS**

This grant will support Dr. Jay’s mentoring of patient-oriented researchers focused on addressing obesity-related health disparities and improving care of vulnerable patients. The research aims, focused on evaluating the impact of social determinants of health on weight management, will provide opportunities for junior researchers to obtain expertise in health equity, social determinants of health, and community-engaged research. Dr. Jay will focus her mentoring on researchers underrepresented in medicine (URM) and help them stay engaged, productive, and funded in science.

**Funder:** NIH K24 (4/1/23-3/31/28; $626,379)

**General Internal Medicine Fellowship**

Led by Melanie Jay, MD, along with faculty from across our NYUGSOM institutions and affiliates, this fellowship supports physicians committed to careers in academic general medicine with research focused on improving the quality, safety, equity, and effectiveness of care in our communities. In addition to independent clinical work, this two-year fellowship includes tuition support for a Masters in Clinical Investigation (MSCI) or a Masters in Health Professions Education (MHPE).

*Caroline McNaughton, MD* obtained her medical degree from The University of Chicago Pritzker School of Medicine and completed her residency in internal medicine at Montefiore Moses-Weiler. During her 2-year fellowship she will enroll in the MSCI and conduct health services research focused on improving cardiovascular disease outcomes. One project will explore the use of low-dose CT scans as a screening tool to improve preventive treatment access for atherosclerotic heart disease.

**Addiction Medicine Fellowship**

Directly by Joshua Lee, MD and Associate Program Director *Diana Lee, MD*, a graduate of the Addiction Medicine fellowship, the ACGME accredited and HRSA-funded Addiction Medicine (AM) fellowship trains three fellows per year, with the intention of placing them in medically underserved communities. The 12-month fellowship includes multiple rotations in community clinics, inpatient and emergency settings at NYC H+H/Bellevue Hospital, NYC H+H/ Gotham Health, Gouverneur and the FHCs at NYU Langone.

**Funder:** HRSA
Merrin Master Clinician Fellowship
The Merrin Master Clinician Fellowship is a two-year program for physician-educators who are recognized for their potential as inspiring teachers. The fellowship aims to improve the quality of clinical teaching and the delivery of patient-centered care. Fellows work with leaders in the field of medical education and receive an annual stipend for professional development.

Jennifer Lee Dong, MD: Point of Care Ultrasound for Primary Care (POCUS)
After witnessing firsthand the value of POCUS with one of her own patients, Dr. Dong will build her own expertise in using this diagnostic tool and create and deliver a practical POCUS curriculum for outpatient clinicians.

Masha Slavin, MD: Migrant Health
With 70% or more of her patients comprised of immigrants, Dr. Slavin will identify the social determinants of health and other relevant factors affecting these patients. She will create and implement a curriculum for the multidisciplinary team at Bellevue Hospital to meet the needs of these patients.

Training Research Staff for Clinical Trials Recruitment: Addressing Social Determinants of Health
Lisa Altshuler, PhD; Sondra Zabar, MD
The need to increase research participation from vulnerable communities, including racial and ethnic minorities, those experiencing health disparities and social determinants of health (SDOH), is essential and poses barriers to recruitment from such communities. We identified the need to enhance research staff’s awareness of and communication skills necessary to address these barriers. We are providing group objective structured clinical examinations (GOSCE) to those engaged in recruitment (n=36) for clinical trials and other research projects. This project builds upon our recent NIH R01 Engagement in Longevity Management in collaboration with Division of Geriatric Medicine.
Funder: NYU Clinical & Translational Science Institute

Strategic Teamwork for Effective Practice – Mentor Development Program (STEP-MDP)
Sondra Zabar, MD; Lisa Altshuler, PhD
High-impact research necessitates dynamic teams, but professional research staff are often excluded from mentoring and development activities. STEP-MDP mentors research staff to become leaders, offering skills for team performance, growth, and productivity. Workshops cover communication, delegation, relationships, and leadership through mentorship. Since 2016, 11 cohorts with 182 participants from various departments have undergone the program. Survey results indicate 95% found STEP-MDP useful, improving communication, leadership, motivation, coaching, and community skills. These gains were sustained at the 6-month follow-up.
Funder: NYU Clinical & Translational Science Institute
Point of Care Ultrasound Comprehensive Training Program

**Michael Janjigian, MD; N. Caroline Srisarajivakul-Klein, MD; Isaac Holmes, MD and Aron Mednick, MD**

Addressing the rising use of point-of-care ultrasound, a year-long Integrated Sonographic Course (I-ScaN) trains participants in bedside ultrasonography for cardiac, lung, abdominal, and vascular systems. The program includes didactics, hands-on instruction, and case reviews, reaching across NYU campuses and hospitals and the continuum of training, including faculty, residents, and medical students. Since 2018, 160 faculty and 220 residents have been trained. Since 2022, 54 students participated in a POCUS elective. Furthermore, a 2-day national CME course, New York Point-of-Care Ultrasound accredited by the Society of Hospital Medicine, is offered annually and has trained 150 people. The IScaN and NY Point of Care Ultrasound Course consistently rate as “one of the best” courses.

Master of Health Professions Education (MHPE)

Co-Directed by **David Stern, MD; Adina Kalet, MD**

Core faculty: Abigail Winkel, MD, MHPE; **Sondra Zabar, MD; Colleen Gillespie, PhD; Richard Greene, MD, MHPE; Alison Squires, PhD, RN; Kinga Eliasz, PhD; Simon Jones, PhD**

NYU Langone’s Department of Medicine began offering an MHPE in 2015. To date 30 candidates have graduated, equipped with the knowledge and skills to design high quality educational programs for healthcare professionals. Learners conduct high impact, rigorous research and apply educational theories, including student-centered learning, to solve problems within their individual professional environment. The two-year, part-time MPHE program combines campus-based and distance-learning activities in collaboration with the School of Health Professions Education at Maastricht University in the Netherlands and four international sites in Canada, Egypt, and Singapore.
• Julia Adamian, MD, appointed to Section Chief, General Internal Medicine and Clinical Innovation, Tisch Hospital
• Jennifer Adams, MD, appointed as Director, Center for Empathy in Medicine, IIME
• Sandeep Bhat, MD, MBA, FACP, AAHIVS, promoted to Clinical Associate Professor of Medicine
• Lynn Buckvar-Keltz, MD, received AΩA Professionalism Award
• Xi Kathy Chu, MD, appointed as Associate Program Director, Brooklyn FHC; accepted to SGIM’s MedEd Scholarship Faculty Development program
• Patrick Cocks, MD, named Associate Chair for Education; received the Distinction in Education Award from the NYUGSOM Educator Community.
• Elaine De Leon, MD, selected as a NIMHD Health Disparities Research Institute Fellow
• Arielle Elmaleh-Sachs, MD, MS, appointed Medical Director for the Sunset Park FHC Adult Medicine and Specialty Clinics, 2023 CTSI/TREC Mentor Development Program
• Ann R. Garment, MD, 2024 ACP Conference Chair, Scientific Planning Committee
• Richard Greene, MD, MHPE, promoted to Professor of Medicine received the 2023 Health Professional Leadership 10th Anniversary LGBT Health Workforce Conference Award; and Outpatient Teacher of the Year, Department of Medicine
• Barry M. Grossman, MD, promoted to Clinical Associate Professor of Medicine
• James Grigg, MD, appointed Associate Medical Director, Bellevue Primary Care Safety Net Clinic & SHOW Vans
• Rachael Hayes, MD, co-chair of the SGIM Innovations in Medical Education Programming Committee
• Isaac Holmes, MD, named Associate Director of NYU Internal Medicine POCUS
• Margaret Horlick, MD, appointed to Program Director of the Internal Medicine Residency Program
• Michael Janjigian, MD, received the Faculty Education Mentor of the year from the NYUGSOM Department of Medicine
• Melanie Jay, MD, MS, received the 2023 SGIM Mid-Career Research Mentorship Award, Faculty Research Mentor of the year from the NYUGSOM Department of Medicine
• Yinan Lan, MD, received the 2023 Joan H. Tisch Community Health Prize
• Diana Lee, MD, appointed as Assistant Medical Director, Addiction Medicine for FHCs; Assistant Program Director, Addiction Medicine Fellowship
• Meredith Lynn, MD, 2023–24 Clinical Quality Fellowship Program, Greater New York Hospital Association (GNYHA) and the United Hospital Fund (UHF)
• Sarah Moore, MD, promoted to Clinical Associate Professor of Medicine and appointed as GIM Residency Program, Outpatient Site Director, NYC H+H/Bellevue
• Katherine Mullins, MD, appointed Assistant Medical Director, Addiction Medicine for FHCs
• Danielle Ofri, MD, received the 2023 Nicholas E. Davies Memorial Scholar Award for Scholarly Activities in the Humanities and History of Medicine from the ACP and the 2023 Guggenheim Fellowship for General Nonfiction
• Robert Pitts, MD, named Doctor of the Year, H+H/Bellevue
• Asa E. Radix, PhD, MPH, FACP, promoted to Clinical Professor of Medicine
• Verity Schaye, MD, MHPE, 2023 Conference Chair for Society to Improve Diagnosis in Medicine
• Michael Tanner, MD, promoted to Professor of Medicine
• Christian Torres, MD, appointed Director, Department of Internal Medicine Organization for Nurturing Diversity (DIMOND) Program
• Marc M. Triola, MD, FACP, promoted to Professor of Medicine (with Tenure)
• Andrew Wallach, MD, received the New York BIO COVID Hero award
• Ann Winters, MD, appointed Medical Director, Bellevue Primary Care Safety Net Clinic & SHOW Vans
• Kevin Zhang, MD, appointed as GIM Residency Program, Outpatient Site Director, VA Medical Center
DGIMCI LEADERSHIP AND CLINICAL SITES

**Sondra R. Zabar, MD**
Professor, Department of Medicine
Director, DGIMCI
Director, Program in Medical Education Innovations and Research

**Julia Adamian, MD**
Clinical Associate Professor, Department of Medicine; Medical Director, NYU Langone Internal Medical Associates; Section Chief, DGIMCI, Tisch Hospital; Senior Medical Director, Department of Medicine FGP; Director, Ambulatory Care Primary Care, Brooklyn, Manhattan, Queens

**Jennifer G. Adams, MD**
Associate Professor, Department of Medicine
Director, Primary Care Internal Medicine Residency Program
Director, Center for Empathy in Medicine

**Isaac Dapkins, MD**
Clinical Associate Professor, Departments of Population Health and Medicine
Chief Medical Officer, Family Health Centers at NYU Langone Health

**Ann R. Garment, MD**
Clinical Associate Professor, Department of Medicine
Section Chief, DGIMCI, NYC H+H/Bellevue Medical Director, Primary Care Addiction Medicine Clinic, NYC H+H/Bellevue

**Kathleen Hanley, MD**
Associate Professor, Department of Medicine
Associate Director, Department of Medicine
NYC H+H/Gotham Health Gouverneur
Associate Director, Primary Care Internal Medicine Residency Program

**Melanie Jay, MD, MS**
Associate Professor, Departments of Medicine and Population Health; Director, Research Collaboration and Mentoring, DGIMCI; Program Director, General Internal Medicine Fellowship; Co-Director, NYU Langone Comprehensive Program on Obesity

**Joseph Leung, MD**
Clinical Professor, Department of Medicine
Director, Outpatient Medicine, VA NY Harbor Health Care System - Manhattan
Section Chief, DGIMCI, VA NY Harbor Health Care System – Manhattan

**James A. Schmidtberger, MD**
Clinical Assistant Professor, Department of Medicine
Director, Department of Medicine, NYC H+H/ Gotham Health Gouverneur

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Associate Director, Clinical Innovations and Clinical Affairs, DGIMCI
Ambulatory Care Chief Medical Officer, NYC H+H Office of Ambulatory Care
Clinical Director, Ambulatory Care, Bellevue Hospital Center
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Emmanuella DeJesus, MHA
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Heather Levitt, MHS
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PrMEIR Team
Christine Beltran, MEd
Harriet Fisher
Khemraj Hardowar
Abigail Henderson
Penelope Lusk, MS
Lisa Mayevsky
Shriya Nallamaddi, MS

NEW FACULTY

Faculty Group Practice
Maria del Carmen Al-Homsi, Joan H. Tisch Center for Women’s Health
George Alvarez, Carle Place
Maha Awikeh, Brooklyn Medical Arts Pavilion
Efrosini Barish, West Palm Beach
Julia Cherkasova, Brooklyn Medical Arts Pavilion
Kana Chin, Bayside
Steven Cook, Riverhead/Mattituck
Marvin Dang, Brooklyn Heights
Danielle Ferstler, Bethpage
Christina Johnson, Bethpage
Amy Kuruvilla, Bronxville
Edward Lee, Bay Ridge
Christopher Leyton, Internal Medicine Associates (IMA)
John McKnight, Washington Square
Caroline McNaughton, Internal Medicine Associates (IMA)
Rada Norov, West Brighton/Bensonhurst
Yogesh Patel, Lake Success
Preetha Phillips, Bethpage
Samia Qazi, Bethpage
Dean Robosa, West Side
Felipe Saavedra, Preston Robert Tisch Center for Men’s Health
Kim Schoenfeld, Joan H. Tisch Center for Women’s Health
Rebecca Seigel, Washington Square
Joan Stroud, Brooklyn Heights
Victoria Beata Toro, Bethpage
Cindy Tsui, Joan H. Tisch Center for Women’s Health
Paul Weissberg, Long Beach
Heba Zaher, Shoreham

Family Health Centers at NYU Langone
Joshua Ononuju
Brita Roy
Taranika Sarkar

NYC Health+Hospitals
Brandon Adelson
Danielle Baurer
Samuel Dubin
Alexa Goldstein
James Goodrich
Darrell Irizarry
Samuel Kebede
Natalie Lazarescu
Samantha Sanders
Ann Winters

New York Harbor Healthcare System – Manhattan VA
Albert Ahn
Sarvenaz Vandyousefi
Sandra Wittleder
We, in the Division of General Internal Medicine and Clinical Innovation, have a shared purpose of advancing compassionate quality medical care for the people we serve. Through our research collaborations across NYUGSOM, the institution as a whole, our affiliated agencies and external organizations, we are making strides toward our core goal of improving the health of patients seen in diverse health care settings using strategies that are both practical to implement and translatable beyond our walls. As researchers, our faculty bring expertise in improving medical education, disease prevention and chronic disease care among urban populations.

We want to thank all our collaborators. We look forward to working with these and other institutions and organizations.

**Division of Hospital Medicine**
Douglas B. Bails, MD  
Kevin Eaton, MD  
Ian Fagan, MD  
Kevin Hauck, MD  
Katherine Hochman, MD  
Michael Janjigian, MD  
Neha Jindal, MD  
N. Caroline Srisarajivakul-Klein, MD  
Robert N. Link, MD  
Marwa Moussa, MD

**Institute for Innovations in Medical Education**
Jesse Burk Rafel, MD, MRes  
Abigail Ford Winkel, MD, MHPE  
So-Young Oh, MA, MS  
Marc Triola, MD

**NYU Health Sciences Library**
Fred LaPolla, MLS

**MCW, Robert D. and Patricia E. Kern Institute for the Transformation of Medical Education**
Tavinder K. Ark, PhD  
Adina Kalet MD, MPH

**New York Simulation Center**
Joanne Agnant, MD, MSc  
Donna P. Phillips, MD  
Deepak Pradhan, MD, FCCP, ATSF  
Katie E. Tame, MS, CPXP

**NYU School of Global Public Health**
Donna Shelley, MD, MPH