

See One, Do One, Teach One; Shaping the Future of Medicine; Alec C. Kimmelman, MD, PhD, Appointed Chief Executive Officer of NYU Langone Health and Dean of NYU Grossman School of Medicine; Healthcare Policy Headwinds; Match Day 2025; 4th Annual Hospital Medicine Symposium; CME Highlight featuring the NYU Langone Health Seminar in Advanced Rheumatology; Innovations in Medicine featuring Anoma Nellore, MD; Humanities and Art in Medicine; Featured Student Essay by Jeffrey Park

April 2025

INSIDE *Medicine*

The Newsletter of the Department of Medicine

A Message from the Chair, Steve Abramson

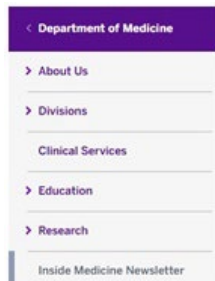
See One, Do One, Teach One

We are familiar with the phrase "See one, do one, teach one," first popularized by the renowned Bellevue-trained surgeon William Stewart Halsted in the late 19th century. In recent years, skills training, greater supervision and competency-based progression have largely replaced that traditional training model. Less well appreciated is the more subtle form of "See one, do one, teach one," namely the importance of role modeling by their teachers as trainees progress in their training. As Atul Gawande noted, "The thing you learn from a mentor is not what they tell you, but how they navigate their world." This resonates within our own program, exemplified in Jeffrey Park, MS2's essay, *A Healing Space*, below, who observes during his medicine clerkship, "Here is a group of passionate and intelligent caregivers, taking care of perhaps the strangest of strangers." This observation is not isolated among our students, whose feedback is clear in clerkship evaluations, highlighted in the story below, *Shaping the Future of Medicine*. Both faculty and residents achieve the highest ratings as both teachers and role models. This remarkable achievement, of which we can all be proud, demonstrates for our students "how we navigate our world" as they make their own journey becoming physicians.

Missed an Issue of the Inside Medicine Newsletter?

Visit our archive on the
Department of Medicine
webpage to explore past
issues.

**Inside Medicine
Newsletter Archive**



Inside Medicine Newsletter



Sustaining Excellence: National Recognition Sets Us Apart

March 2025

U.S. News & World Report Edition; House Staff Appreciation Week; Inpatient Protected Time; Connecting Future Physicians; Inspired MD Summit; Innovations in Medicine featuring Jeremy R. Bettler, MD, MPH; Historian Is In



Resilience

February 2025

Department of Medicine Annual Recognition Reception; Medicine Career Exploration Shadowing Opportunities; Winterfest 2025; Celebrating the Legacy of Bruce N. Cronstein, MD; Innovations in Medicine featuring Lawrence Phillips, MD; Big 100 Read Event; CME Highlight featuring Big Gut Seminars: A Multidisciplinary Focus on Pancreatic Disease

Shaping the Future of Medicine

The Power of Role Models

For students on the Medicine Clerkship, the department's faculty and residents are not just educators—they are mentors and exceptional role models. Students consistently recognize and celebrate their contributions to professionalism, patient care, and medical excellence. In the most recent clerkship block, an impressive 100% of students rated faculty and residents as outstanding role models in these areas, according to the Medical Student Clerkship Evaluations (see figure below). This remarkable feedback underscores the profound impact these educators have on shaping future physicians.

Michael Locurcio, MD, Clerkship Director emphasized, "Our department has always had a rich tradition of education and service, and I think that the students recognize it. It's more the rule than the exception, and those who feel that sense of community often stay on as faculty members." This tradition of mentorship and excellence resonates strongly with students, creating a lasting impression that often shapes their careers.



Verity E. Schaye, MD, Associate Professor of Medicine and Assistant Dean for Education in the Clinical Sciences, noted the department's consistent achievement in surpassing school targets: "Our general school internal targets are 85% good/excellent (50% excellent), which we are consistently exceeding." Such high praise in evaluations highlights the outstanding quality of teaching and leadership provided by faculty and residents alike.

Students evaluate their clinical teachers in key areas such as professionalism, patient-centered care, and educational effectiveness after each clerkship block. Within the Department of Medicine, the Medicine, Ambulatory Care, and Critical Care clerkships offer students a wide range of clinical experiences.

"Our faculty and residents don't just train students—they set the standard for what it means to be an exceptional physician," said Dr. Locurcio. "These evaluations don't just capture data—they reflect a culture of mentorship built over generations."

Congratulations to our Department of Medicine faculty and house staff for their unwavering dedication to teaching, mentorship, and patient-centered care.



Education Dashboard Graph of Student Rating of Selected Clerkship Quality: Faculty as Role Models

Alec C. Kimmelman, MD, PhD

Appointed CEO of NYU Langone Health and Dean of NYU Grossman School of Medicine



Alec C. Kimmelman, MD, PhD, the next CEO and Dean of NYU Grossman School of Medicine, effective September 1, 2025

NYU Langone Health has announced that Alec C. Kimmelman, MD, PhD, will become its next Chief Executive Officer of NYU Langone Health and Dean of NYU Grossman School of Medicine, effective September 1, 2025. A physician-scientist specializing in pancreatic cancer research, Dr. Kimmelman

currently serves as director of the Laura and Isaac Perlmutter Cancer Center and chair of the Department of Radiation Oncology.

"I am humbled and excited to be the next CEO and Dean of NYU Langone and appreciate the confidence the Board of Trustees and the search committee have placed in me," Dr. Kimmelman said. "I look forward to building upon Dr. Grossman's astonishing record of achievements that have catapulted this institution to be one of the top-ranked health systems in the nation."

A leading expert in cancer metabolism, Dr. Kimmelman has published extensively in top scientific journals, including *Cancer Cell*, *Nature*, and *Science*. His research focuses on the metabolic vulnerabilities of pancreatic cancer, identifying how these tumors use fuel to grow and pioneering new therapeutic strategies. His work has led to multiple clinical trials and has been funded by the National Institutes of Health for over 15 years. (NYU Langone Health NewsHub, 2025).

In addition to his leadership roles, Dr. Kimmelman serves on the editorial boards of major scientific journals and has received numerous honors, including election to the American Society for Clinical Investigation and the Ruth Leff Siegel Award for Excellence in Pancreatic Cancer Research by Columbia. Dr. Kimmelman earned his MD and PhD from the Icahn School of Medicine at Mount Sinai in 2003 and completed his radiation oncology residency at Brigham and Women's Hospital, a Harvard Medical School affiliate, in 2008.

We congratulate Dr. Kimmelman on his appointment and look forward to his leadership in advancing NYU Langone Health's commitment to excellence in patient care, research, and education.

References:

- NYU Langone Health NewsHub: "[NYU Langone Health Names Alec C. Kimmelman, MD, PhD, Next CEO and Dean](#)"

Healthcare Policy Headwinds

Discussion of Recent Federal Administrative Actions



Chair Steven B. Abramson, MD, discussing the recent federal administrative actions with the Department

The Department, in conjunction with the Office of Science & Research, convened a meeting in March focused on navigating federal policy changes and their implications for the Department of Medicine and NYU Langone Health. Dr. Abramson was joined by Dafna Bar-Sagi, PhD, Chief Scientific Officer, Brian D. Elbel, MPH, PhD, Associate Dean of Research Mission, Joan Margiotta, JD, Associate General Counsel, and Tracey Volz, Assistant Vice President of Sponsored Research Operations.

Key potential federal policy changes and their possible impacts were discussed, including reductions to Medicare and Medicaid reimbursements, federal research cuts, as well as constraints on diversity, equity and inclusion programs. Faculty and NYULH leaders engaged in an open discussion on how to navigate these issues, focusing on financial sustainability, advocacy efforts, and institutional resilience. Leaders within the Department of Medicine, the Office of Science & Research, and across NYU Langone Health are proactively evaluating strategies to adapt to these potential federal policy shifts while maintaining their commitment to exceptional patient care, health equity, medical education, and innovative research.



Match Day 2025

Medical Students Begin Their Next Chapter



NYU Grossman School of Medicine students gather to celebrate on Match Day

On Friday, March 21, students at NYU Grossman School of Medicine gathered for one of the most defining moments of their medical careers—Match Day. At precisely noon, they tore open their envelopes, revealing the residencies that will shape their futures as physicians.

The Class of 2025 achieved an impressive 100% match rate, with nearly half of the graduating students (44) remaining at NYU Langone Health locations. Eight of the nineteen graduates pursuing careers in internal medicine will join our residency program, one of the most competitive in the country.

To commemorate the occasion, each student received a personal thank-you note signed by faculty, site directors, and chief residents, acknowledging their hard work and dedication. An appreciation video was shared on Instagram ([@nyugsom_imres](#)), capturing the joy and excitement of the day.

"We are very proud of our match results from this year. The incoming class is comprised of talented and innovative individuals who we look forward to seeing thrive here at NYU. We look forward to meeting them in June and welcome them in person!" Margaret R. Horlick, MD, Director, Internal Medicine Residency Program.

emerging technologies, was very poignant, timely, and relevant to so many hospitalists across the country and it was wonderful to be able to showcase how NYU is at the forefront of this nation-wide trend to incorporate AI technology into patient care. I felt immense pride to be part of an institution that is quite literally changing the game for how we practice medicine!" said Dr. Fagan, Medical Director of Inpatient Medicine Units at Bellevue Hospital and Clinical Associate Professor in the Department of Medicine.

As a leader in medical innovation, NYU Langone Health continues to shape the future of hospital medicine, and the enthusiasm for this year's symposium underscores the growing interest in AI-driven healthcare solutions.

CME Highlight

NYU Langone Health Seminar in Advanced Rheumatology – A Legacy of Excellence



Course Director Michael H. Pillinger, MD, engages with the audience during the Q&A session at the seminar

On March 20-21, the Division of Rheumatology hosted its annual NYU Langone Health Seminar in Advanced Rheumatology. As the first and oldest continuously operating rheumatology conference in the U.S., the seminar sets a standard of excellence in research and education. Its history traces back to the Rheumatic Diseases Study Group, established in the 1930's by NYU Langone Health's Dean Currier McEwen, MD, a pioneer of scientific rheumatology. Today, the seminar stands at the leading edge of contemporary rheumatology research and practice.

Designed for both investigators and clinicians, this year's seminar assembled a faculty of more than 30 thought leaders. Speakers guided participants through the complexities of autoimmune and rheumatologic diseases including rheumatoid arthritis, systemic lupus erythematosus, psoriatic arthritis, gout and other crystal diseases, osteoarthritis, and related conditions, highlighting the latest advances and enhancing investigational and clinical skills.

Attendees explored the most recent research and evidence-based practices. Pathophysiology, diagnostic strategies, and emerging therapeutics were all addressed. Therapies such as immune reset through CAR-T cell therapy, anti-CD-19 targeting, and studies into the role of the human microbiome in autoimmunity are just some examples of the topics covered. Some 150 participants participated in lectures, case discussions and other formats, leaving the meeting well-equipped to manage the complexities of rheumatologic patient care and up to date on pathogenesis and current approaches.

Panel discussions were a highlight of the seminar, encouraging in-depth engagement with controversial topics, emerging research, and patient care challenges. Attendees had the opportunity to ask questions,

challenge the faculty, and engage in vibrant exchanges. Coffee and meal breaks were designed expressly for networking and collaboration, offering up an environment conducive to sharing ideas and experiences. Participants interacted with peers, faculty, and industry representatives, building lasting professional relationships.

“Our goal is to sustain the excellence of what has gone before, and make it new each year,” said Jill P. Buyon, MD, Director of the Division of Rheumatology. “Rheumatology is moving forward at an astonishing pace. We want to support our participants to keep up with the field, and do so in a way that is exciting, stimulating, and frankly, just plain fun.”

The NYU Langone Health Seminar in Advanced Rheumatology represents a tradition of excellence that continues to shape the future of rheumatology. By providing rheumatologists and other clinicians with the latest knowledge and skills, each year’s seminar empowers them to deliver the highest standard of care to their patients. This year’s was no exception.



Innovations in Medicine:

Conversations with Our Expert Faculty



Anoma Nellore, MD

Associate Director of Translational Research, Vaccine Center
Associate Professor, Department of Medicine

This month, we spotlight Anoma Nellore, MD, who serves as the Associate Director of Translational Research at the NYU Langone Health Vaccine Center. Holding faculty positions in both the Department of Medicine and Department of Surgery at NYU Grossman School of Medicine, Dr. Nellore plays a pivotal role in bridging laboratory discoveries with clinical applications in vaccine development. In this interview, she shares how her background in infectious diseases informs her approach to vaccine development and the key challenges in the field today. She also discusses the importance of public confidence in vaccines, the role of translational research in patient care, and exciting initiatives at the Vaccine Center.

Can you share what drew you to NYU Langone Health?

NYU Langone Health has incredible strengths in the tripartite missions of educational excellence, clinical care, and bench-to-bedside research, and these aspects drew me to the position.

How does your background in infectious diseases and translational research shape your approach to vaccine development and implementation?

As a physician specializing in infectious diseases, particularly in the care of immunocompromised and transplant patients, I have seen firsthand the severe impact of infections on this vulnerable population. During the SARS-CoV-2 pandemic, the disproportionate morbidity and mortality among immunocompromised patients reinforced my commitment to researching better ways to protect them. This experience has driven my focus on improving vaccine strategies and other preventive immunotherapies to enhance their effectiveness and accessibility.

What are some of the most pressing challenges in vaccine research today, and how do you see the Vaccine Center addressing them?

One of the most pressing challenges today is in our messaging to the public to promote confidence in executed and ongoing vaccine research. The Vaccine Center directly addresses these challenges via its Community Advisory Board and other educational outreach initiatives, including the recruitment of participants into relevant studies.

What role does translational research play in bridging the gap between laboratory discoveries and real-world patient care?

By collaborating with laboratory scientists to test whether observations made in murine or other non-human model systems can be identified in human subjects, translational research plays a key role in advancing patient care.

Are there any upcoming projects or initiatives that you are particularly excited about?

The Vaccine Center has incredible patient specimen biorepositories with carefully phenotyped clinical metadata from healthy volunteers and after influenza infection and vaccination. Leveraging these specimens toward making actionable insights in vaccine-mediated protection is very exciting.

What advice would you give to trainees and early-career physicians interested in infectious disease research and vaccine development?

Infectious diseases is one of the most dynamic fields in medicine because pathogens are ever evolving. Moreover, we are learning how to manipulate the immune system in increasingly sophisticated ways, exposing our patients to novel opportunistic infections or novel presentations of opportunistic infections. There are ever-evolving questions about how best to protect healthy and immunocompromised individuals from these infections. Thus, the field offers constant learning, and I feel this is a major draw for trainees.

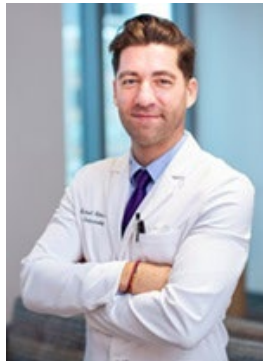
Humanities and Art in Medicine

The Humanistic Medicine Program fosters creativity, collaboration, and a deeper understanding of medicine through opportunities in arts, humanities, and ethics for medical students, staff, and faculty to develop greater compassion and curiosity.

We are excited to start expanding literary, visual, and performing arts and medical ethics programming for medical students, staff, and faculty. We seek to offer interdisciplinary and longitudinal opportunities for people across the hospital who share common interests and passions. As we build on our existing offerings, we are looking for faculty members who are interested in being part of monthly steering discussions about the future of humanities programming. Please fill out this [brief form](#) if you have areas of interest in arts and/or ethics.

We are also excited to welcome our new Artist-in-Residence, Desmond Beach, MFA, PhD (candidate). His work encompasses multiple mediums—sculpture, fiber arts, performance, and more—with the goal of using art for healing. Join us ([RSVP here](#)) in welcoming him on March 31 with his first event: an overview of his work and an artmaking workshop. Over the next 2 years of his residency, he'll be helping build and facilitate our visual arts programming.

Finally, we are pleased to be collaborating with Facilities, Volunteer Services, and Musicians On Call to start offering music performances in the Tisch lobby on a monthly basis later this year.



Michael Natter, MD

Clinical Assistant Professor of Medicine

Co-Director, Humanistic Medicine Program

NYU Grossman School of Medicine

The Digital Pulse

A roundup of select posts from our social media channels.

Be sure to join the conversation, and don't forget to tag us as you share your accomplishments!

NYU Department of Medicine @NYULH_DeptofMed · Mar 19
At Med #GrandRounds today @nyugrossman, David M. Levine, MD, MPH, MA, (@davidlevinemd) of @MassGenBrigham gave an outstanding talk on Home Hospital care, exploring its model, evidence base, and strategies for nationwide expansion.

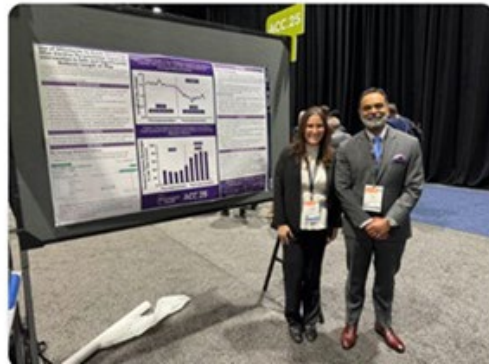
Key Takeaways:

▶ Home Hospital provides
[Show more](#)



Sunil V. Rao @SVRaoMD · Mar 29
Do all post PCI pts need the same obs period?

Fantastic study by Dr. Joey Lerner @nyulangone Cardiology fellow showing that individualized milestone-based observation reduces LOS!



Gastroenterology & Hepatology | NYU Langone @NYULH_Ga... · Mar 28
A big thank u to our amazing course faculty & staff for making #BigGutIBD2025 a success! 🌟 #LisaMaltier @DavidHudesmanMD @andreluzmoreira @EdBarnesMD @drtracyhull @DrCoreySiegel @DrJordanAxeirad @shannonchangmd @AdamFayeMD @HolmerMd @SimonHongMD @bradmorganstern @DrMikeDolinger



NYU Langone PCCSM @NYULangonePCCSM · Mar 26
Check out our team at today's Sarcoid Symposium, guiding multidisciplinary discussions on complex cases, advancing research, & shaping the future of sarcoidosis care. Proud to collaborate & innovate!



Follow our social channels by clicking the photo or icons above!

The Book Report

Katherine Hochman, MD, MBA - *Anxious Generation*

The Anxious Generation, by Dr. Jonathan Haidt, is that eye-opening #1 NYT bestseller must-read that we wish we didn't have to think about. But we must. And we do – every day. Who else is astonished by the dramatic increase in young people hospitalized with eating disorders, overdoses, withdrawals, infections from needles and suicide attempts? Just last week, I brought my med students to examine a young man whose chronic use of xylazine resulted in an enormous soft tissue infection necrosing most of his left buttocks. What the [BLEEP] is going on?

Haidt hits us hard in Chapter 1 with facts and figures showing unequivocally that rates of anxiety, depression and self-harm amongst adolescents rise exponentially in 2010-2015 – years that correlate exactly to the mass uptick in smart-phones. This transition from play-based to phone-based childhoods paves the way to what Haidt describes as “the Great Rewiring” in our youth. As a gross generalization, parents did not monitor their kids’ on-line activity, leaving them vulnerable to a powerful technology without guardrails. As kids spend more and more time on-line, the impact is profound – social deprivation, sleep deprivation, inability to maintain attention and flat-out addiction. What an absolute waste of a young mind that is supposed to be wired to make connections with actual people in actual Nature. There is a whole

chapter on why social media harms girls more than boys, which is particularly disturbing and says a lot about our society.

Haidt concludes with a call to action to governments, parents, schools with specific suggestions on how to curb this trend. While the US will likely not follow Australia's recent lead in banning social media for children under 16, there has been a recent trend to ban phones during school hours in order to maximize learning. That's a great start. As a parent, my big mantra is "no phones at the table" – we actually have to talk with one another. As a physician, I am committed to not engaging with my phone during every patient encounter. And as a concerned member of our community, I am resolved to spread the word.

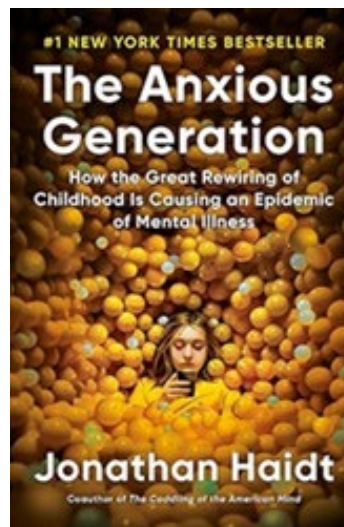


Katherine Hochman, MD, MBA

Associate Professor, Department of Medicine

Division Director, Hospital Medicine

Associate Chair, Quality of Care, Department of Medicine



Featured Student Essay

Clerkship Award for Outstanding Essay in Medical Science

A Healing Space

Hospital is a word that originates from the Latin root *hospes*, which means guest or stranger; *host*, *hotel*, *hospitality* are words that share this root. Indeed, hospitals since medieval Europe until the mid-19th century were often religious institutions that provided shelter to the poor or homeless [1].

Over time, the hospital as a spatial concept would undergo many paradigm shifts: The advent of medical technology in the late 19th century, notably the X-ray machine, would require patients to be consolidated into a singular space [1]. After the world wars, hospitals would adopt the dominant ideology of global capitalist development to maximize scale, consolidation and corporate-level bureaucracy, with Bellevue's Building H being a prominent example [2]. Soon after, a 1984 paper in *Science* by Roger Ulrich would show that having a tree visible out the window improved recovery after cholecystectomies [3]; and like wildfire, hospital architecture would enter its "post-modern" era, characterized by decorative artwork, hotel-like lobbies, shopping centers, individualized rooms and artificial gardens [4]. Today, hospital design is a booming area of interest for boutique architecture firms, whose reputations were built by designing villas and art galleries.

Despite these paradigm shifts, the name and its etymology – hospital, *hospes* – remain steadfast. This is to say that the hospital remains a place both for, and of, *strangers*, who we have now come to call patients. For me, the central question is *not* how hospital design and theory have changed throughout the years, but more so whether, despite these changes, the hospital lives up to its name and remains

accessible for any stranger; and whether physicians in these spaces are providing compassionate care for such strangers, however strange their stories may be.

Ms. K was assigned to me during morning rounds by my resident, like any other patient. Until I met her, she was, to me, a collection of numbers – pertinent labs that were up-trending or down-trending, within normal or abnormal. I remember meeting her for the first time: Standing by her bedside, I partially undressed her, and listened to her heart and lungs; I pressed on her belly; I pinched her fingers and legs. I talked to her about her heart and why it was diseased, and why this could explain her symptoms.

Over the coming days, we would get to know more about Ms. K in direct and indirect ways. From numbers on the chart, we knew that her heart was improving. Interestingly, we also found out that she had been infected with *Strongyloides*, a first for me; I had learned this was a parasite that infected you, most commonly, through barefoot walking – and it got me curious about where she had grown up, where she's living now, or why she would be walking barefoot on grounds infected with parasites. I also knew that she had family, but not too many: a niece and nephew difficult to reach, but no mention of next of kin.

One morning, however, the team noticed that her bed was wet with blood. She was having a GI bleed and needed to go to the endoscopy suite emergently. I was tasked to stay at her bedside and ensure that she finishes her GoLytely, which she loathed. At the endoscopy suite, she coded, but was resuscitated in 90 seconds. It was only in the ICU afterwards, however, that she would arrest again and I would learn, upon returning to service after the weekend, that she had died.

This was my first encounter with the passing of a patient I was following. I took some time afterwards to keep her in my thoughts and honor her life. Our brief conversations had, over time, gathered into a greater narrative about her lived experience: She had grown up in mid-century America as a Black American under social, economic and political constraints with no next of kin that I, a healthy male from Korea in a digitized world with a loving family and now in medical school, have no grasp of. To me, she was indeed the strangest of strangers; our lives could not have been more different. And yet, I had grown to care for her, love her and mourn her passing in ways that were, frankly, illogical.

In his book *La Production de l'espace*, French philosopher Henri Lefebvre writes that space is both a physical and socially constructed reality. For Lefebvre, space is divided between the perceived, conceived and lived, so as to suggest that space is constantly being produced and reproduced by social discourse. To occupy a space is really to situate yourself within – and in doing so, reinforce – a certain ideology that produced the space [5].

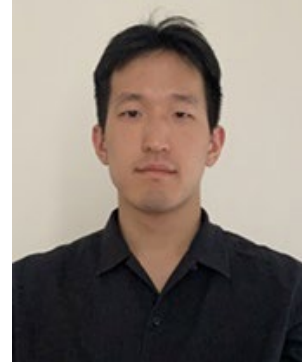
From caring for Ms. K, I realized that hospitals are a social construction as much as they are a physical reality. The physical hospital may be a building that has been optimized for medical care, but the building itself is only a fleeting space beholden to its machines. Instead, what defines the hospital space is the ideology of its people and their determination to care for strangers. Its quality is defined by how capable its providers are at closing the gap between *stranger* and *patient*. From taking care of Ms. K in the halls of Bellevue, I realized that a hospital can never be defined by the technology, signage or artificial nature decorating its walls, nor by any architectural buzzword.

Walking around Bellevue, one can see this everywhere: Here is a group of passionate and intelligent caregivers, taking care of perhaps the strangest of strangers, in whatever physical space is available to them. Throughout this clerkship, I have found this to be greatly inspiring. There is no logic, nor an outstanding incentive here, but only a common humanity, one that will never be captured by any theory or paradigm. Every day, I am amazed and inspired by this collective mission that I have come to feel for myself; every day, I am reminded of how special it is to belong in the hospital.

References

- [1] Verderber S. Innovations in Hospital Architecture. Routledge; 2010.
 - [2] Murphy MP, Mansfield J. The Architecture of Health: Hospital Design and the Construction of Dignity. Cooper Hewitt; 2021.
 - [3] Ulrich RS. View through a window may influence recovery from surgery. Science. 1984 Apr 27;224(4647):420-1.
 - [4] Martin D, Nettleton S, Buse C, Prior L, Twigg J. Architecture and health care: a place for sociology. Sociol Health Illn. 2015 Sep;37(7):1007-22. doi: 10.1111/1467-9566.12284.
 - [5] Lefebvre H. The Production of Space. Blackwell. 1991.
-

Jeffrey Park is a second-year medical student at NYU Grossman School of Medicine, where he is a Klara and Larry Silverstein merit scholar and part of the accelerated 3-year pathway for internal medicine residency at NYU. He completed his undergraduate work at UC Berkeley, where he studied molecular and cell biology and political economy. Afterwards, he spent 2 years completing his mandatory military service for South Korea. In medical school, he is passionate about clinical medicine and bioethics. In his free time, he enjoys catching up with friends, exploring the city, and playing his favorite records at local bars.



News & Awards

Faculty Honors

Leon H. Charney Division of Cardiology



The Heart Rhythm Center under Director, **Larry A. Chinitz, MD**, was named a recipient of the 2025 Murj Cardiovascular Achievement and Recognition of Excellence (CARE) Award. The award will be presented at the Heart Rhythm 2025 Conference.



Jose Gabriel Barcia Duran, PhD, received a Career Development Award from the American Heart Association.



Ira C. Schulman, MD, was named as the inaugural Florence and Joseph Ritorto Associate Professor in Cardiology.

Holman Division of Endocrinology, Diabetes, and Metabolism



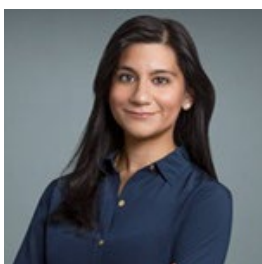
Ann Marie Schmidt, MD, received a 2025 Merit Award from the American Heart Association.

Division of Geriatric Medicine and Palliative Care



Meghan E. Lembeck, MD, was honored with the Recognition of Outstanding Clerkship Education by the Office of Medical Education after receiving exceptional feedback from medical students in a recent survey. The award highlights Dr. Lembeck's dedication to enhancing students' clinical education and training, as well as her exemplary role as a model of professional commitment, identity, and excellence.

Division of Nephrology

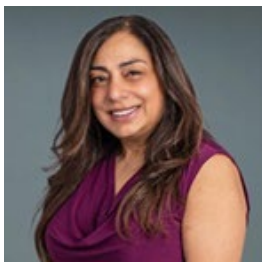


Aprajita Mattoo, MD, was elected as a Vice Chair of the Association of Indians in America's Medical Council Gala.

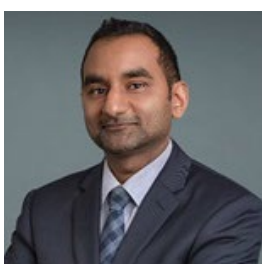


Irfana Soomro, MD, was appointed to Medical Director of the Pancreas Transplant Program.

Division of Pulmonary, Critical Care, and Sleep Medicine



Rashmi N. Aurora, MD, has been invited to serve on the expert panel presenting at the Women's Sleep Health Congressional Briefing on Capitol Hill.



Ashwin Basavaraj, MD, has been elected as Secretary to the Medical Board at NYC Health + Hospitals/Bellevue.



Caralee E. Caplan-Shaw, MD, has been awarded the TB Elimination Champions Award by the Bellevue TB Screening Program.



Benjamin G. Wu, MD, has been elected to the American Thoracic Society Pulmonary Infections and Tuberculosis Programming Committee.

We want to hear from you!

Have ideas or topics for the next issue of *Inside Medicine*? Email us at InsideMedicineNewsletter@nyulangone.org with your topic suggestions, updates, or achievements. Let's work together to showcase the incredible contributions across the Department of Medicine!



Upcoming Events & CME

CME: Asthma, Airways and the Environment

April 24, 7:30am – 4:35pm

Details and registration link [here](#)

CME: 5th Annual Cardiometabolic Risk in Inflammatory Conditions: Emerging Insights and Treatment of Inflammation in Cardiovascular Disease

April 25, 7:45am – 3:30pm

Details and registration link [here](#)

CME: Advanced Heart Failure Cases and Controversies 2025

May 9, 7:00am – 6:00pm

Details and registration link [here](#)

Select Publications

Leon H. Charney Division of Cardiology

Slater J, Maron DJ, Jones PG, **Bangalore S**, **Reynolds HR**, Fu Z, Stone GW, Kirby R, **Hochman JS**, Spertus JA; ISCHEMIA Research Group. Evaluating the appropriate use criteria for coronary revascularization in stable ischemic heart disease using randomized data from the ISCHEMIA trial. *Circ Cardiovasc Qual Outcomes*. 2025 Mar;18(3):e010849. doi: [10.1161/CIRCOUTCOMES.124.010849](https://doi.org/10.1161/CIRCOUTCOMES.124.010849). Epub 2025 Feb 26. PMID: 40008421.

Massera D, **Sherrid MV**, Scheinerman JA, Swistel DG, **Razzouk L**. Medical, surgical, and interventional management of hypertrophic cardiomyopathy. *Circ Cardiovasc Interv*. 2025 Mar;18(3):e014023. doi: [10.1161/CIRCINTERVENTIONS.124.014023](https://doi.org/10.1161/CIRCINTERVENTIONS.124.014023). Epub 2025 Feb 10. PMID: 39925290.

Tompkins R, Venkatesh P, **Small AJ**, **Halpern DG**. Lifelong care of females with congenital heart disease. *Circ Res*. 2025 Mar 14;136(6):553-565. doi: [10.1161/CIRCRESAHA.124.325596](https://doi.org/10.1161/CIRCRESAHA.124.325596). Epub 2025 Mar 13. PMID: 40080536.

Holman Division of Endocrinology, Diabetes & Metabolism

Zheng Y, **Iturrate E**, Li L, Wu B, **Small WR**, **Zweig S**, Fletcher J, Chen Z, Johnson SB. Classifying continuous glucose monitoring documents from electronic health records. *J Diabetes Sci Technol*. 2025 Mar 12:19322968251324535. doi: [10.1177/19322968251324535](https://doi.org/10.1177/19322968251324535). Epub ahead of print. PMID: 40071848; PMCID: PMC11904921.

Lee C, **Naik R**. The role of continuous glucose monitoring in people without diabetes: a us perspective. *Chronicle of Diabetes Research and Practice Jan–Jun 2025*. 2025 Jan 3;46852(2):172. doi: [10.4103/cdrp.cdrp16.24](https://doi.org/10.4103/cdrp.cdrp16.24)

Locasale JW, **Goncalves MD**, Di Tano M, Burgos-Barragan G. Diet and cancer metabolism. *Cold Spring Harb Perspect Med*. 2024 Dec 2;14(12):a041549. doi: [10.1101/cshperspect.a041549](https://doi.org/10.1101/cshperspect.a041549). PMID: 38621831; PMCID: PMC11610756.

Division of Environmental Medicine

Thurston GD, Andersen ZJ, Belesova K, Cromar KR, Ebi KL, Lumsden C, de Nazelle A, Nieuwenhuijsen M, Soares da Silva A, Teixidó O, Rice MB. Transitioning from climate ambitions to climate actions through public health policy initiatives. *Environ Epidemiol*. 2025 Mar 6;9(2):e373. doi: [10.1097/EE9.0000000000000373](https://doi.org/10.1097/EE9.0000000000000373). PMID: 40060026; PMCID: PMC11888974.

Division of Gastroenterology and Hepatology

Jacobson BC, Anderson JC, Burke CA, Dominitz JA, **Gross SA**, May FP, Patel SG, **Shaukat A**, Robertson DJ. Optimizing bowel preparation quality for colonoscopy: consensus recommendations by the US Multi-Society Task Force on Colorectal Cancer. *Am J Gastroenterol*. 2025 Mar 4. doi: [10.14309/ajg.00000000000003287](https://doi.org/10.14309/ajg.00000000000003287). Online ahead of print. PMID: 40035345.

Babbar S, **Sachar M**, **Faye A**, **Knotts RM**. Esophageal disorders in the older adult. *Curr Treat Options Gastroenterol*. 2025 Dec;23(1):3. doi: [10.1007/s11938-025-00468-6](https://doi.org/10.1007/s11938-025-00468-6). Epub 2025 Feb 27. PMID: 40061442.

Carlson DA, Pandolfino JE, Yadlapati R, Vela MF, Spechler SJ, Schnoll-Sussman FH, Lynch K, Lazarescu A, **Khan A**, Katz P, Jain AS, Gyawali CP, Gupta M, Garza JM, Fass R, Clarke JO, Chokshi RV, Chen J, Ravi K, Chan WW, Sultan S, Konda VJA. A standardized approach to performing and interpreting functional lumen imaging probe panometry for esophageal motility disorders: the Dallas consensus. *Gastroenterology*. 2025 Feb 4:S0016-5085(25)00341-5. doi: [10.1053/j.gastro.2025.01.234](https://doi.org/10.1053/j.gastro.2025.01.234). Online ahead of print. PMID: 39914779.

Division of General Internal Medicine and Clinical Innovation

Meltzer KK, **Chen K**, Zhang C, Zhou S, Long T, Jimenez J. Healthcare utilization and chronic disease management for non-medicaid-eligible patients in a city-wide safety-net healthcare access program. *J Gen Intern Med*. 2025 Feb;40(2):430-436. doi: [10.1007/s11606-024-08983-5](https://doi.org/10.1007/s11606-024-08983-5). Epub 2024 Aug 5. PMID: 39103607; PMCID: PMC11803054.

Beltran CP, Wilhite JA, Gonzalez CM, Porter B, Torres C, Horlick M, Hauck K, Gillespie C, Zabar S, Greene RE. Requested a different doctor: developing and evaluating an osce assessing core skills in supporting trainees facing patient discrimination. *J Gen Intern Med*. 2025 Jan;40(1):207-212. doi: [10.1007/s11606-024-09021-0](https://doi.org/10.1007/s11606-024-09021-0). Epub 2024 Sep 30. PMID: 39349704; PMCID: PMC11780009.

Wittleder S, Bhoopsingh B, Gollwitzer PM, **Jay M**, Mutter E, Valshtein T, Angelotti G, Oettingen G. WOOP as a brief alcohol intervention led by lay coaches in college settings. *Health Educ Behav*. 2025 Jan 24:10901981241310216. doi: [10.1177/10901981241310216](https://doi.org/10.1177/10901981241310216). Epub ahead of print. PMID: 39850980.

Division of Geriatric Medicine and Palliative Care

Reckrey, J. M., Russell, D., Burgdorf, J., & Aldridge, M. Consumer-directed personal care in the New York metropolitan area: trends in use from 2017 to 2022. *Journal of the American Medical Directors Association*. Volume 26, Issue 5 105535 May 2025

Grudzen CR, Siman N, Cuthel AM, Adeyemi O, Yamarik RL, Goldfeld KS; PRIM-ER Investigators; Abella BS, Bellolio F, Bourenane S, **Brody AA**, Cameron-Comasco L, **Chodosh J**, Cooper JJ, Deutsch AL, Elie MC, Elsayem A, Fernandez R, Fleischer-Black J, Gang M, Genes N, Goett R, Heaton H, Hill J, Horwitz L, Isaacs E, Jubanyik K, Lamba S, Lawrence K, Lin M, Loprinzi-Brauer C, Madsen T, Miller J, Modrek A, Otero R, Ouchi K, Richardson C, Richardson LD, Ryan M, Schoenfeld E, Shaw M, Shreves A, Southerland LT, Tan A, Uspal J, Venkat A, Walker L, Wittman I, Zimny E. Palliative care initiated in the emergency department: a cluster randomized clinical trial. *JAMA*. 2025 Feb 18;333(7):599-608. doi: [10.1001/jama.2024.23696](https://doi.org/10.1001/jama.2024.23696). PMID: 39813042.

Morgan B, Massimo L, Ravitch S, **Brody AA**, **Chodosh J**, Karlawish J, Hodgson N. Experiences of inner strength in persons newly diagnosed with mild cognitive impairment: A qualitative study. *Geriatr Nurs*. 2025 Feb 5;62(Pt B):30-40. doi: [10.1016/j.gerinurse.2025.01.047](https://doi.org/10.1016/j.gerinurse.2025.01.047). Epub ahead of print. PMID: 39914227.

Division of Hospital Medicine

Rabinowitz R, Drake CB, Talan JW, Nair SS, **Hafiz A**, **Andriotis A**, Kogan R, Du X, Li J, Hua W, Lin M, **Kaufman BS**. Just-in-time simulation training to augment overnight ICU resident education. *J Grad Med Educ*. 2024 Dec;16(6):713-722. doi: [10.4300/JGME-D-24-00268.1](https://doi.org/10.4300/JGME-D-24-00268.1). Epub 2024 Dec 13. PMID: 39677310; PMCID: PMC11641875.

Wang E, Samaroo A, **Weisstuch J**, Rudy B. The use of a single risk assessment tool for mortality and numerous hospital-acquired conditions. *J Healthc Qual*. 2024 Nov-Dec 01;46(6):370-379. doi: [10.1097/JHQ.0000000000000456](https://doi.org/10.1097/JHQ.0000000000000456). Epub 2024 Oct 15. PMID: 39405523.

Drake CB, Rhee DW, Panigrahy N, Heery L, Iturrate E, Stern DT, Sartori DJ. Toward precision medical education: Characterizing individual residents' clinical experiences throughout training. *J Hosp Med*. 2024 Aug 5. doi: [10.1002/jhm.13471](https://doi.org/10.1002/jhm.13471). Epub ahead of print. PMID: 39103985.

Division of Infectious Diseases and Immunology

Oot A, Kapadia F, Moore B, **Greene RE**, **Katz M**, Denny C, **Pitts R**. A mixed-methods evaluation of an HIV

pre-exposure prophylaxis educational intervention for healthcare providers in a NYC safety-net hospital-based obstetrics and gynecology clinic. *AIDS Care*. 2024 Oct;36(10):1537-1544. doi: [10.1080/09540121.2024.23642](https://doi.org/10.1080/09540121.2024.23642). Epub 2024 Jun 29. PMID: 38943674.

Division of Nephrology

Charytan DM, Winkelmayer WC, Granger CB, Middleton JP, Herzog CA, Chertow GM, Eudicone JM, Whitson JD, Tumlin JA; ADAPT Investigators. Effects of dialysate potassium concentration of 3.0 mmol/l with sodium zirconium cyclosilicate on dialysis-free days versus dialysate potassium concentration of 2.0 mmol/l alone on rates of cardiac arrhythmias in hemodialysis patients with hyperkalemia. *Kidney Int*. 2025 Jan;107(1):169-179. doi: [10.1016/j.kint.2024.10.010](https://doi.org/10.1016/j.kint.2024.10.010). Epub 2024 Oct 26. PMID: 39490411.

Dember LM, Hsu JY, Mehrotra R, **Charytan DM**, **Mehta M**, **Cukor D**. Pain coping skills training for patients receiving hemodialysis: the HOPE Consortium randomized clinical trial. *JAMA Intern Med*. Published online December 30, 2024. doi:[10.1001/jamainternmed.2024.7140](https://doi.org/10.1001/jamainternmed.2024.7140)

Durand CM, Massie A, Florman S, Liang T, Rana MM, Friedman-Moraco R, Gilbert A, Stock P, **Mehta SA**, **Mehta S**, Stosor V, Pereira MR, Morris MI, Hand J, Aslam S, Malinis M, Haidar G, **Small CB**, Santos CAQ, Schaenman J, Baddley J, Wojciechowski D, Blumberg EA, Ranganna K, Adebiyi O, Elias N, Castillo-Lugo JA, Giorgakis E, Apewokin S, Brown D, Ostrander D, Eby Y, Desai N, Naqvi F, Bagnasco S, Watson N, Brittain E, Odum J, Redd AD, Tobian AAR, Segev DL; HOPE in Action Investigators. Safety of kidney transplantation from donors with HIV. *N Engl J Med*. 2024 Oct 17;391(15):1390-1401. doi: [10.1056/NEJMoa2403733](https://doi.org/10.1056/NEJMoa2403733). PMID: 39413376; PMCID: PMC11606542.

Division of Precision Medicine

Gambi G, Boccalatte F, Rodriguez Hernaez J, **Lin Z**, **Nadorp B**, Polyzos A, Tan J, Avrampou K, Inghirami G, Kentsis A, Apostolou E, Aifantis I, **Tsirigos A**. 3D chromatin hubs as regulatory units of identity and survival in human acute leukemia. *Mol Cell*. 2025 Jan 2;85(1):42-60.e7. doi: [10.1016/j.molcel.2024.11.040](https://doi.org/10.1016/j.molcel.2024.11.040). Epub 2024 Dec 23. PMID: 39719705.

Mehta SS, **Surapaneni AL**, **Pandit K**, Xu Y, **Horwitz L**, **Blecker S**, Blum MF, Chang AR, Shin JI, **Grams ME**. Glucagon-like peptide-1 receptor agonist and sodium-glucose cotransporter 2 inhibitor prescriptions in type 2 diabetes by kidney and cardiovascular disease. *J Am Soc Nephrol*. 2024 Nov 27. doi: [10.1681/ASN.0000000585](https://doi.org/10.1681/ASN.0000000585). Epub ahead of print. PMID: 39688374.

Xu Y, Shin JI, Wallace A, Carrero JJ, Inker LA, **Mukhopadhyay A**, **Blecker SB**, **Horwitz LI**, **Grams ME**, Chang AR. Shortfalls in follow-up albuminuria quantification after an abnormal result on a urine protein dipstick test. *Ann Intern Med*. 2024 Nov;177(11):1593-1595. doi: [10.7326/ANNALS-24-00549](https://doi.org/10.7326/ANNALS-24-00549). Epub 2024 Oct 1. PMID: 39348706.

Division of Pulmonary, Critical Care, and Sleep Medicine

Zhang RS, **Yuriditsky E**, **Zhang P**, Taslakian B, **Elbaum L**, **Greco AA**, **Mukherjee V**, Postelnicu R, **Amoroso NE**, Maldonado TS, **Horowitz JM**, **Bangalore S**. Impact of time to catheter-based therapy on outcomes in acute pulmonary embolism. *Circ Cardiovasc Interv*. 2025 Jan;18(1):e014499. doi: [10.1161/CIRCINTERVENTIONS.124.014499](https://doi.org/10.1161/CIRCINTERVENTIONS.124.014499). Epub 2025 Jan 21. PMID: 39836740.

Shah DP, Thaweethai T, Karlson EW, Bonilla H, Horne BD, Mullington JM, Wisnivesky JP, Hornig M, Shinnick DJ, Klein JD, Erdmann NB, **Brosnahan SB**, Lee-Iannotti JK, Metz TD, Maughan C, Ofotokun I, Reeder HT, Stiles LE, **Shaukat A**, Hess R, Ashktorab H, Bartram L, Bassett IV, Becker JH, Brim H, Charney AW, Chopra T, Clifton RG, Deeks SG, Erlandson KM, Fierer DS, Flaherman VJ, Fonseca V, Gander JC, Hodder SL, Jacoby

VL, Kotini-Shah P, Krishnan JA, Kumar A, Levy BD, Lieberman D, Lin JJ, Martin JN, McComsey GA, Moukabary T, Okumura MJ, Peluso MJ, Rosen CJ, Saade G, Shah PK, Sherif ZA, Taylor BS, Tuttle KR, Urdaneta AE, Wallick JA, Wiley Z, Zhang D, Horwitz LI, Foulkes AS, Singer NG; RECOVER Consortium. Sex differences in long COVID. *JAMA Netw Open*. 2025 Jan 2;8(1):e2455430. doi: [10.1001/jamanetworkopen.2024.55430](https://doi.org/10.1001/jamanetworkopen.2024.55430). PMID: 39841477; PMCID: PMC11755195.

Goggin KE, Seo SJ, **Wu BG, Ivelja S, Kugler MC, Chang M, Darawshy F, Li Y, Chung CJ, Kyeremateng Y, Tsay JJ, Singh S, Sterman DH, Segal LN**, Egilmez NK, Li Q. Differential effects of high-fiber and low-fiber diets on anti-tumor immunity and colon tumor progression in a murine model. *Cancer Prev Res (Phila)*. 2025 Feb 6. doi: [10.1158/1940-6207.CAPR-24-0159](https://doi.org/10.1158/1940-6207.CAPR-24-0159). Epub ahead of print. PMID: 39911064.

Division of Rheumatology

Ciccia F, Gandolfo S, Caporali R, **Scher JU**. Understanding the spectrum from preclinical psoriatic arthritis to early diagnosis of the disease. *Lancet Rheumatol*. 2024 Nov 20:S2665-9913(24)00268-6. doi: [10.1016/S2665-9913\(24\)00268-6](https://doi.org/10.1016/S2665-9913(24)00268-6). Epub ahead of print. PMID: 39579780.

Buyon JP, Carlucci PM, Cuneo BF, **Masson M, Izmirly P, Sachan N, Brandt JS, Mehta-Lee S**, Halushka M, **Thomas K**, Fox M, **Phoon CK, Ludomirsky A, Srinivasan R**, Lam G, **Wainwright BJ, Fraser N**, Clancy R. Substantiation of trophoblast transport of maternal anti-SSA/Ro autoantibodies in fetuses with rapidly progressive cardiac injury: implications for neonatal Fc receptor blockade. *Lancet Rheumatol*. 2025 Jan;7(1):e6-e9. doi: [10.1016/S2665-9913\(24\)00331-X](https://doi.org/10.1016/S2665-9913(24)00331-X). Epub 2024 Nov 15. PMID: 39557050.

Carlucci PM, Cohen B, Saxena A, Belmont HM, Masson M, Gold HT, Buyon J, Izmirly P. A retrospective evaluation of glucagon-like peptide-1 receptor agonists in systemic lupus erythematosus patients. *Rheumatology (Oxford)*. 2024 Oct 10:keae547. doi: [10.1093/rheumatology/keae547](https://doi.org/10.1093/rheumatology/keae547). Epub ahead of print. PMID: 39388251.

We want to hear from you!

Have ideas or topics for the next issue of *Inside Medicine*? Email us at InsideMedicineNewsletter@nyulangone.org with your topic suggestions, updates, or achievements. Let's work together to showcase the incredible contributions across the Department of Medicine!

**INSIDE
Medicine**
The Newsletter of the Department of Medicine

Missed an issue of the **Inside Medicine** Newsletter?

Visit our new archive on the Department of Medicine webpage to explore all past issues.

Inside Medicine Newsletter Archive



Copyright © 2025 NYU Langone Health. All rights reserved.

Our mailing address is NYU Langone Health • 550 First Avenue • New York, NY 10016