2023-2024

Internal Medicine Residency Program



Our mission:

To serve, to heal, to educate.





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To serve, to heal, to educate.

Designated Institutional Official

Antoinette Spevetz, MD, FCCM, FACP

Chairman of Department of Medicine

Stephen W. Trzeciak, MD, MPH

Program Director

Rachel S. Nash, MD, FACP

Associate Program Directors

Jenny Melli, MD (Director - Primary Care) Elizabeth Cerceo, MD, FACP Kevin D'Mello, MD, FACP, FHM Alexandra Lane, MD (APD, Primary Care)

Assistant Program Directors

Solomon Dawson, MD Kathryn L. Haroldson, MD Ritesh Patel, MD Nicholas Roussin Young, MD Daniel Olea-Mendoza, MD

Division Head of Medical Education Brian Gable, MD

Director of Resident Research Satyajeet Roy, MD

Assistant Program Director of Primary Care and Director of Resident Clinic

Alexandra Lane. MD

CONTACT

Internal Medicine Residency Program Administrators

Laura Chropka Terry Mortka Jessika Eggert

Phone

856.342.2000 Ext. 1009646, 1009640 or 10095066

Medical Student Education Coordinator

Betty Ann Girouard, 856.757.7842

Email

CooperIMProgram@cooperhealth.edu

Website

www.cooperhealth.edu/residencies/internalmedicine

Address

Cooper University Health Care Internal Medicine Education Programs, 101 Haddon Avenue, 3rd floor, Suite 304 Camden NJ, 08103

Welcome



The Internal Medicine Residency Program at Cooper Medical School of Rowan University and Cooper University Hospital is dedicated to facilitating the development of well-rounded physicians and ensuring that each individual realizes their full potential.

Our Mission supports the mission of Cooper University Health Care: To serve, to heal, to educate. **To Heal:** Our mission is to provide excellent, equitable care to all patients that seek care at our institution. In line with the Quadruple Aim, our ultimate goal is to improve outcomes for all patients, provide high value care, maximize patient satisfaction, and improve resident and health care worker well-being.

To Serve: We recognize that our patients do not exist in a vacuum, and integral to our mission is serving our community of Camden, New Jersey. Thus, our mission is to improve the health of the Camden community as a whole. We do this by training physicians-advocates who excel in providing culturally competent and trauma-informed care.

To Educate: Our mission is to train residents to become skilled in scholarly work, and to develop a growth mindset as they work to improve their individual performance. Our residents are excellent teachers, and are constantly surrounded by medical students and other learners. Our mission is to train educators of the next generation through our unique curriculum. Our goal is to support our residents in any career path of their choosing, which includes our primary care program, preparation for fellowship, or a career in general internal medicine.

We realize that residents are mature, self-directed learners and we actively engage them in the development and implementation of our curriculum that focuses on building the many skill sets required of an internal medicine physician. We believe that the next generation of doctors needs to have the skills to be life-long learners, team-focused patient-advocates, and leaders in their field. We achieve these goals through our unique curriculum that emphasizes active learning during our many diverse conferences, clinical experiences, and simulation scenarios.

Although we make it a priority to provide an exceptional didactic experience, we realize that medicine must be learned at the bedside. The diversity of patients and the scope of pathophysiological disease processes that residents encounter on a daily basis are impressive. Our residency provides exceptional experiential learning in a wide variety of clinical environments where residents apply evidence-based medicine under the tutelage of world-renowned faculty. We pride ourselves on not only creating knowledgeable physicians, but also on instructing our residents on how to think critically and act as professionals. Here at Cooper we emphasize the importance of bedside diagnosis by facilitating the development of strong analytical clinical reasoning and physical examination skills, and working within an interdisciplinary team.

What makes Cooper a great place to train?

Cooper University Health Care (CUHC) is the only academic tertiary care center located in southern New Jersey. As such, other hospitals in the region refer their most complex patients to our exceptional full-time faculty in all subspecialties of Internal Medicine. We have the privilege to treat diverse urban, suburban, and rural populations from different socioeconomic and cultural backgrounds.

Our clinical campus is renowned for its world class ICU, Level 1 Trauma Center, cardiac center of excellence, and its new Neurointerventional Suite in addition to its exceptional inpatient and ambulatory care. MD Anderson Cancer Center at Cooper has revolutionized how we care for patients afflicted with neoplastic disease. In August 2012, we welcomed the inaugural class to Cooper Medical School of Rowan University (CMSRU), a four year allopathic medical school that is committed to training the physicians of tomorrow in an innovative and supportive manner. Since then, the Internal Medicine Residency Program has worked closely with the students as teachers and colleagues, and celebrated the graduations of multiple classes.

Residents at Cooper benefit from a fully integrated, electronic medical records system, EPIC, that has led to safer and more efficient care in all clinical environments. In addition, all scheduling information and audio-video recordings of our conference series are available electronically to residents so that they may access the material remotely via smartphone or computer at their convenience.

The Internal Medicine Residency Program at Cooper is firmly committed to maximizing our residents' quality of life and the "4+2" structure allows for protection from fatigue and more time to enjoy the things that matter most to residents outside of medicine. Cooper's location offers something for everyone, in New Jersey and Pennsylvania. We are minutes away from Philadelphia, and an easy commute using readily accessible public transportation. If you prefer a suburban environment, many are a short drive away.

If you are interested in a cutting edge program with a unique approach to providing exceptional clinical training, developing your leadership and advocacy skills, and maintaining an excellent quality of life. Cooper is the place for you. I invite you to take the time to explore our program.

Rachel S. Nash, MD, FACP

Program Director, Internal Medicine Residency Program Cooper University Health Care Assistant Professor of Medicine, Cooper Medical School of Rowan University

Message From the Chief Residents

Thank you for your interest in the Cooper University Hospital Internal Medicine Residency Program! This is an exciting time to be entering the field of medicine, and an exciting time to become a part of Cooper University Hospital.

We are located in Camden, New Jersey, minutes from downtown Philadelphia. This area provides a variety of patients, ranging from the underserved population of Camden to the more affluent suburbs. Because we are the major university hospital center for all of southern New Jersey, and the only Level 1 Trauma Center, patients are routinely flown to Cooper from other hospitals giving our residents experience with critically ill patients. In addition, Cooper has a large network of outpatient offices throughout Camden County making our outpatient and consulting experiences as varied and educational as the inpatient.

We pride ourselves on being a comprehensive academic program that places an emphasis first and foremost on training good internists. In addition, every subspecialty is represented at Cooper which enhances our training. Education is a priority with a formalized curriculum facilitated by program leadership. Residents are encouraged to step into the educator role early by leading lectures and SIM sessions. Residents are given autonomy to make decisions while caring for patients but also have an appropriate level of supervision.

One of the strengths we value most is the camaraderie between residents. There is a true feeling of teamwork and residents thrive together, both inside and outside the hospital. We understand that it is important to balance training with a good quality of life. The culture is warm and friendly, and we look for candidates who would fit well into this environment. You will find that your colleagues are hardworking, intelligent and collegial. Our program leadership is approachable and always looking to work with the residents to improve our program. We welcome you to be part of our tight knit group.



Internal Medicine Residency Program Overview



The Internal Medicine Residency Program at Cooper currently consists of more than 80 residents. There are 28 PGY-1 positions:

- · 22 Categorical positions
- · 5 Primary Care track positions
- · 1 Preliminary year position

We have a rolling admissions system and adhere strictly to all ACGME rules and regulations. The NRMP match numbers for these programs are:

Categorical 138014OCOPrimary Care 138014OMOPreliminary 138014OPO

Cooper University Health Care offers extensive subspecialty training with the following established fellowships:

- · Cardiology
- · Clinical Cardiac Electrophysiology
- · Critical Care Medicine
- · Endocrinology
- · Gastroenterology
- · Hematology and Medical-Oncology
- · Infectious Diseases
- · Interventional Cardiology
- · Interventional Pulmonology
- Nephrology
- · Hospice and Palliative Medicine
- · Pulmonary Disease and Critical Care Medicine
- · Rheumatology



Educational Experience



Follow us on Social Media

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The Internal Medicine Residency Program at Cooper offers a well-rounded educational experience characterized by diverse clinical exposure, structured didactic education and strong faculty mentorship. In our categorical training program, residents are exposed to a variety of clinical experiences and are given increasing medical responsibilities over the course of their three years of training. Our program prepares residents for subspecialty training or primary care practice in the inpatient or ambulatory setting. Once a resident chooses a career path, they can tailor a curriculum centered around their future goals. Residents are offered their choice of electives every year to encourage exploration of different specialties or other experiences. Residents are encouraged to apply for an outside elective during their PGY 2 and 3 years to gain exposure to different health systems.

Our program also offers specialized courses of study for those interested in particular career paths. Our Hospitalist Track provides opportunities to pursue quality improvement projects as well as exposure to hospital administration and/or academic medicine career paths. We also offer a Primary Care Track which emphasizes outpatient, community-based, academic medicine.

Medical Teaching Service

The Medical Teaching Service is where residents learn the core of inpatient medicine and treatment. Each inpatient team consists of a teaching Hospitalist, a PGY-2 or PGY-3 senior resident, a PGY-1 resident, and a variable number of medical students. The resident and intern work as a team to care for hospitalized patients under the supervision of the Hospitalist. Bedside teaching rounds are conducted daily and focus on clinical reasoning, physical examination skills, advanced communication skills, and evidence-based diagnosis and management. You will have the opportunity to hone your teaching skills, as teams are paired with CMSRU 3rd and 4th year medical students.

The recent geographic localization of patients enables us to have closer communication with nursing, ancillary staff and consulting services ultimately leading to better patient care. Proximity to our patients allows us to better communicate treatment plans and any changes that occur throughout the day in an effective manner. Residents regularly participate in Multidisciplinary Rounds (MDR), connecting directly with the bedside nurse, Transitional Navigator, and physical therapist.

The call system is based on a Q4 model with a resident who stays late every fourth day to cover other teaching teams.



Educational Experience continued



Find More Online

View faculty pages, meet our residents, and learn more about our program by visiting:

www.cooperhealth.edu/ residencies/internal-medicine



The 4+2 Schedule

Our residency program benefits from a 4+2 schedule. Residents are assigned to one of six cohorts, each led by a third-year chief resident. These cohorts consist of roughly 13 members, including residents from all three class years as well as those completing a preliminary year. The academic year is divided into six-week blocks, with four weeks of each block devoted to traditional clinical rotations such as inpatient floor medicine, critical care, cardiology, night medicine or elective. During these four weeks, residents do not partake in any ambulatory clinic duties. This minimizes interruption during inpatient rotations and promotes true immersion within each clinical training environment.

Every cohort cycles through ambulatory week every sixth week. During this time, residents rotate through clinic sites in Camden as well as other suburban sites throughout Southern New Jersey. By design, residents are guaranteed a "golden weekend" at least two weeks out of every six. This highlights our focus on preserving resident wellness in creating our schedule. Residents remain in the same cohort throughout their three years of training, which fosters the formation of strong bonds among cohort members. The cohort system helps to bring a sense of community and family to our program and leads to the formation of lifelong friendships.

Intensive Care

Cooper University Hospital state-of-the-art 30-bed medical intensive care unit (ICU) staffed by and internationally nationally renowned academic intensivists. Our ICU is a tertiary referral center for the entire South Jersey region, which means that we take care of a complex and diverse population of critically ill patients. The unit is multidisciplinary-Internal Medicine residents work alongside residents from Emergency Medicine and Anesthesia—to provide the most advanced care to critically ill patients afflicted by septic shock, respiratory failure, and other medical emergencies.

Over the course of three years, Internal Medicine residents spend roughly three to four months rotating on critical care services. During this time our residents become proficient in basic procedures (central lines, arterial lines, paracentesis, and lumbar punctures) and ultrasound technique. We also gain exposure in the management of invasive monitoring and advanced support devices including pulmonary artery catheters, intra-aortic balloon pumps, Impella devices, and VV-ECMO. All senior residents rotate through our "Crit Care Green" rotation, during which we evaluate critical care consults on the floor and respond to facilitate rapid responses and codes throughout the hospital. While our residents are never expected to intubate patients on the medical floor, we offer elective rotations in anesthesia for those senior residents who wish to hone their skills in this field.

All of these opportunities ensure that our residents are well equipped to care for critically ill patients; this makes Cooper a great place to train for those interested in critical care.

Educational Experience continued

Cardiology Experience

Cooper University Hospital has a 12-bed coronary care unit (CCU) and a 36-bed cardiology step down unit with telemetry called the progressive care unit (PCU). We have recently revitalized our cardiology training experience with the creation of a combined CCU/PCU service. This service is staffed by one senior resident (PGY-2 or PGY-3) and two interns working under the supervision of a Cardiology fellow and attending. The team takes care of a total of 18 patients on the Cardiology service, including patients in the CCU and PCU. This enables residents to learn about "bread and butter" Cardiology topics such as risk stratification of chest pain, evidence-based management of congestive heart failure, arrhythmias, pericardial disease, and valvular disease, while also following their patients as they transition between the intensive care unit and the medical floor. In the CCU residents gain the additional experience of caring for patients with acute coronary syndrome, cardiogenic shock, and life-threatening arrhythmias. Throughout this rotation, Cardiology faculty and fellows instruct the residents on the nuances of cardiac auscultation as well as interpretation of electrocardiograms, echocardiograms, and coronary angiograms.

Night Medicine

Night Medicine rotations vary between coverage of the Medical Teaching Service, the ICU, and the Cardiology service. Residents can expect to have roughly 4-6 weeks per year of night rotations. The ICU is covered by an intern, a senior resident, and an in-house Critical Care fellow. Critical care attendings also remain in-house overnight to provide an extra layer of support. The Cardiology service is covered by an intern, a senior resident, and an in-house Cardiology fellow. Although adequate supervision is always provided on both of these rotations, there is plenty of autonomy for interns and residents to learn how to manage patients in acute settings.

Night Medicine on the Medical Teaching Service is split between a rotating "Covering Night Team" and an "Admitting Night Team."

The Covering Night Team consists of one intern and one resident. The intern covers five medicine floor teams, each consisting of a maximum of 13 patients. The intern is also responsible for any patient being transferred from the ICU to the teaching floor teams. The covering resident provides supervision in the care of these patients and covers two medical teams and a primary hematology oncology service. On covering nights, residents learn how to manage patient complications and identify acute situations that may require escalation of care.

The Admitting Night Team consists of two interns, one resident, and a dedicating teaching night admitting hospitalist. Both intern and resident work together to complete a maximum of 10 admissions from the Emergency Department to the medicine floors. Each admission is presented to and supervised by the night admitting hospitalist. This rotation gives residents the opportunity to work up undifferentiated patients and guide the course of their hospital stay. It also strengthens our ability to triage patients between observation units, medical floors, or critical care units.

Hematology/OncologyExperience

Through our partnership with MD Anderson, Cooper University Hospital has become a leader in cancer treatment in the South Jersey region. During our time as senior residents, we rotate through the hematology/oncology floor and are able to care for patients with a variety of disease processes including those with acute leukemia requiring induction chemotherapy, small cell lung cancer, different lymphomas, and febrile neutropenia, amongst others. We work closely with a dedicated hematology/oncology fellow and attending while on this rotation. We also understand the importance of a multidisciplinary approach to the treatment of these patients by working closely with pharmacists, social workers and nurses.



Educational Experience continued



Experience teaching rounds,

learn online digital

imaging, and work among

world-renowned faculty.



Ambulatory Experience

Within the 4+2 schedule, every sixth week is reserved for protected ambulatory training time. Residents spend six to seven half-day sessions in outpatient continuity clinic, while the remaining sessions are dedicated to suburban clinic, didactic sessions, and simulation experiences. Having dedicated time devoted to the outpatient setting allows for improved continuity of care and the development of a group practice environment.

Each resident spends the majority of their sessions in a designated primary site: the Resident Clinic at 3 Cooper Plaza in Camden, the Cooper Internal Medicine office site in Gloucester, Cooper Internal Medicine at Pennsville or the Camden VA Primary Care Clinic. In addition to their primary sites, residents also have 2-3 half sessions in suburban clinics with attending supervision. There are additional opportunities for residents to spend a half session practicing in the HIV clinic or conducting home nursing visits. Ambulatory week also includes a half day off so that residents can have space for themselves to invest in self-care and reflection during the busy time of residency.

To enhance the educational experience of our residents, we have created a half-day didactic session that occurs on Tuesday afternoons during ambulatory week. These sessions are run by our Resident Clinic Director, Dr. Alexandra Lane, and are specifically devoted to pertinent topics in outpatient medicine. During our Tuesday afternoon sessions, residents also discuss updates to the group's resident-run Quality Improvement (QI) project. The Tuesday afternoon didactic session ends with use of our SIM center to simulate advanced diagnostic and emergent cases. Our Chief Residents and PGY-3 senior residents are directly responsible for creating the simulation cases, as well as running the cases and providing teaching and feedback afterwards. The afternoon also consists of a new Point-of-Care Ultrasound course led by ultrasound-trained Critical Care and Internal Medicine faculty.

Hospitalist Track

The hospitalist track provides a unique opportunity for residents to gain a deeper insight into what hospitalist medicine at an academic center entails. It is a longitudinal elective with central requirements focused on subjects not specifically taught during residency such as billing, utilization review and contract negotiation. This track also provides elective options that are catered to a resident's specific interests including developing research projects, consult medicine and bedside teaching. While focusing primarily on academic hospital medicine, there are also opportunities to rotate at one of Cooper's sister sites for exposure to community-based practice or to rotate with a nocturnist. Each resident is paired with a hospitalist mentor based on mutual interests.

Preliminary Year

Positions are offered for a Medicine Preliminary Year, Anesthesia Transitional Year, and Neurology Preliminary Year.

Primary Care Track



Welcome to the Primary Care Track at Cooper!

Our Primary Care track was created in 2011 and has grown to five residents per class. Two of our five incoming residents may be matched through an accelerated 3-year primary care training program offered at our affiliated medical school, CMSRU. We are a tight-knit family focusing on providing culturally competent, cost-conscious, evidence based primary care to diverse populations. While we are lucky to have a "program within a program," the PC track is also fully integrated within the larger Internal Medicine program. This provides support and mentorship from all of Program Leadership and coresidents.

The structure of our program is a 4+2 model that tracks with the categorical track so residents travel with their peers throughout residency. As of 2020, we have incorporated a four week outpatient clinic block for PGY-2s and PGY-3s in addition to their +2 ambulatory weeks to increase exposure to the outpatient experience and provide a true window into the daily practice of primary care medicine.

Since the introduction of our PC track, interest in PC as a career continues to increase, and as of 2023 nearly 70% of our graduates have gone on to practice primary care. Other graduates have gone on to careers as Hospitalists or continue on to fellowships. Regardless of the careers our graduates choose, our goal is to train excellent primary care clinicians. Through our didactic series, clinical experiences, and the population we serve in Camden, NJ our residents learn to treat patients in the dynamic, complex healthcare system with special attention to vulnerable populations including medically underserved patients, patients with mental health issues including substance abuse, and trauma informed care.

I invite you to explore our program and to reach out with any questions.

Jenny Melli, MD, FACP

Program Director, Primary Care Track Assistant Professor of Medicine, Cooper Medical School of Rowan University

Primary Care Track FAQs

Can I still go into a subspecialty or be a hospitalist if I do the Primary Care Track?

Yes. The goal of this track is to graduate physicians who are exceedingly well prepared for careers in primary care as clinicians, researchers, community activists, public health administrators and other positions at the forefront of primary medical care. That said, many graduates of primary care tracks across the country do change their minds and enter a subspecialty. The training you receive will certainly prepare you for any path.

How is the Primary Care Track the same as the Categorical Track?

Like the Categorical track, this is a three-year Internal Medicine residency and graduates are ABIM board eligible in Internal Medicine at the end of their training. Residents in the Primary Care track are full and equal members of the Internal Medicine residency program, with all of the same benefits and support. When you are on the inpatient rotations, there is absolutely no distinction made between residents who are on either track.

Primary Care Track

How is the PC track unique?

Primary Care residents complete all the ACGME requirements that their Categorical colleagues do but have additional experiences preparing them for careers in primary care.

- 1. Continuity clinic for PC residents in suite 215, Camden, our most medically and socially complex clinic, where residents develop their own patient panel over the course of 3 and truly become the primary doctor for a panel of patients.
- 2. One additional clinic month assigned in both the PGY2 and PGY3 years designed to be an immersive experience for PC residents to hone their outpatient skills.
- 3. Primary care home call during the PGY2 and PGY3 years overseen by core faculty.
- 4. Access to outpatient subspeciality electives created specifically for future Primary Care providers such as Women's Health, Outpatient Dermatology, Outpatient Cardiology, Sports medicine and more.
- 5. Dedicated primary care lecture series every sixth week of the year all PC residents are relieved of clinical duties to attend. Cooper's newly formed Family Medicine residency shares didactic time intermittently to create a larger community of primary care providers.
- 6. Home visits with a Geriatrician from the VA during your PGY2 year.



Academic Conferences and Specialized Courses



In-depth descriptions
for these conferences,
courses, and more can
be found online at
www.cooperhealth.edu/
internal-medicine.

Academic Conferences

Daily Board Review, Resident Report, Subspecialty Rounds, Medicine Grand Rounds, and Rotating Conferences, including Journal Club, Evidence-Based Physical Diagnosis, Art of Medicine, Nephrology Cases, Business of Medicine, History of Medicine, Resident Wellness, Interdisciplinary Conference, Primary Care Lecture Series, and Cardiology Lecture Series are offered as part of this program.

Intern Survival Series

Intern survival series focuses on fundamental concepts taught by our chief residents to the new interns during the months of July and August. The objective of the lecture series is to teach interns how to medically manage acute scenarios that they will often come across during their day and night shifts. Examples of lectures include work up and management of Altered Mental Status, Hypoglycemia & Diabetic Ketoacidosis, Fever, Shock and Gastrointestinal Emergencies. Additional lectures include Transitions of Care and Antibiotic Choice. We often will have guest lecturers who are typically fellows from various subspecialties. The sessions are made to be interactive in an effort to make interns feel more comfortable and confident approaching these medical scenarios.

Intern Boot Camp

During the first ambulatory week of intern year, each cohort meets for Intern Boot Camp, an immersive week-long experience filled with didactics and simulation work to prepare interns for residency. Interns receive lectures about topics such as clinical reasoning, quality improvement and patient safety, basic EKG interpretation, approach to acid-base, CXR interpretation, intro to ICU medicine, and "bugs and drugs." During the afternoons, interns engage in hands-on simulation sessions to practice cardiac auscultation, central line insertion, lumbar puncture, ultrasound-guided peripheral IV lines and paracentesis. Finally, each group participates in daily interactive simulation cases to review the approach to common clinical scenarios.

Addiction Medicine

Our addiction medicine "selective" adds a unique experience to training at Cooper University Hospital. Unlike other electives, a selective is an integral part of our curriculum that is built into all resident schedules. Working in Camden, NJ exposes us to an underserved population, many of whom are active drug users who frequently present to the hospital with withdrawal or overdose symptoms. As medical students and residents, our exposure to and understanding of these situations often only grazes the surface. The Addiction Medicine selective at Cooper allows us to delve further into the pathophysiology behind these substance use disorders, the various options for treatment, and—equally important—the social barriers that can alter what treatment options are appropriate for each patient. Our addiction medicine training allows us to become more effective and empathetic physicians towards patients affected by the opioid epidemic.

Specialized Courses continued

Fundamental Critical Care Support Course (FCCS)

The Society of Critical Care Medicine, led by our Critical Care attendings, Dr.Noel and Dr. Bartock, created a Fundamental Critical Care Support (FCCS) Course that is now taught worldwide. The course is provided to all Internal Medicine house officers during the first few months of internship. It prepares them for the intensive care unit, focusing on the first 24 hours of management and the recognition and management of sudden clinical deteriorations in the critically ill patient. Skills learned during morning didactic lectures are applied during afternoon interactive stations. This course has been given to thousands of trainees in dozens of countries and the text has been translated into seven languages.

Point-of-Care Ultrasound Course

Through a partnership with the Division of Critical Care Medicine, our residency has implemented a point-of-care ultrasound course to educate residents in this important and growing field. Led by ultrasound-trained Critical Care and Internal Medicine faculty, residents learn image acquisition, diagnostic techniques, and ultrasound-guided procedures in a longitudinal course. The course spans several organ systems and is designed to aid residents' diagnostic and management decisions at the bedside.

The Simulation Lab Experience

The Simulation Lab Experience Cooper Internal Medicine Residents regularly use the Simulation Lab located in the Joint Health Sciences Building. This includes simulated medical emergencies, complex medical cases led by senior residents during didactic sessions of Ambulatory weeks, practice using ultrasound on standardized patients, and the use of Harvey, an advanced simulation mannequin to improve knowledge of cardiac murmurs. Repetition, when combined with formative teaching and feedback, leads to sustained improvements in the knowledge, skills and attitudes of our residents that further enhance patient care, communication skills, and systems-based practice throughout the hospital

Resident as Teacher Elective

Teaching is an integral part of the life of a physician, and this begins as early as intern year with medical students on service. To this end we have developed the Resident as Teacher elective. The core of this elective is dedicated time to prepare and deliver education sessions in many different settings to a variety of learners such as residents and medical students of all levels. Close supervision and real time feedback help to get those who are new to teaching comfortable with their new roles as educators in an academic institution, and help seasoned teachers push themselves and refine their skills. Combined with brief didactics during the rotation and several noon conferences covering the theory behind education, this elective will help train the next generation of medical educators.

Medical Humanities Courses

Cooper University Hospital has been a leader in exploring the use of literature and music as a tool to help instruct residents in the medical humanities. We have a very successful Literature and Medicine course, funded by a grant from the Arnold P. Gold Foundation and the New Jersey Council for the Humanities.

ABC News Medical Media

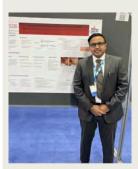
The ABC News Medical Media resident elective is a program designed to develop communication skills during a 4 week medical journalism rotation at ABC News headquarters in New York City. During this elective residents participate in journal study reviews, writing articles, and pitch stories. Residents will also gain competency for writing medical journalism, learn elements of a successful "pitch", develop skills for interfacing with media, and improve the ability to critically analyze and summarize medical journal articles, among many others.

Research at Cooper











Research Curriculum

Cooper supports our Internal Medicine residents through the process of building the knowledge, skills, and attitudes to successfully navigate the research process. Residents are provided mentoring and guidance throughout project inception to development of a manuscript and publication. We have created a didactic series focused on principles of research and opportunities for mentored research projects. This curriculum allows residents to develop the requisite knowledge, skills, and attitudes necessary to develop a research project from hypothesis generation to publication. We have an additional session on how to write an op-ed or letter to the editor. Topics cover everything from developing an aims page and a research hypothesis to understanding the IRB process and submitting a protocol, from becoming a journal reviewer to understanding what journals to submit your article to.

We hold research speed dating events to connect attendings and fellows active in research and are interested in supporting our residents through projects in the Department of Medicine. These hour-long events are held biannually. There are also opportunities to work with our medical students at Cooper Medical School of Rowan University. This can be facilitated through our faculty members or additionally by the research speed dating events held at the medical school.

Residents at Cooper University benefit from the guidance of Dr. Elizabeth Cerceo, Associate Program Director, and Dr. Satyajeet Roy, Director of the Internal Medicine Residency Research Program. Their leadership allows residents to develop unique research projects and see them through. Cooper has a wide breadth of specialty-focused research as well as primary care research opportunities and a diverse patient population. We also have experience with database research and an internal structure for querying our electronic medical record (EMR) for studies within Cooper. Dedicated biostatistical support allows our residents to focus on the clinical aspects of research.

The program will help fund presentations at annual meetings for residents who are first author on abstracts accepted to national conferences. The annual Camden Scholars' Forum Poster Contest is a great forum for poster presentations for everything from case reports to clinical trials. We promote many of the regional conferences in the area including ACP, SGIM, and SHM.

For a full list of research projects completed by our residents please click <u>here</u>.

Quality Improvement and Patient Safety Program

The Cooper IM Residency program has a robust program to educate house staff in quality improvement and patient safety methodologies through numerous activities. A curriculum delivered through noon conference sessions educates residents on improvement science and change management. Residents have opportunities to participate in hospital committees focused on health care improvement as well as to volunteer to present and lead discussions at a Department of Medicine Systems Morbidity & Mortality Conferences that analyzes patient safety events and seeks to prevent them from reoccurring. Each resident will be involved in a QI project that will be presented at an academic medical conference. Our QI/PS program seeks to provide our trainees with the knowledge, skills, and attitudes to be able to evaluate opportunities for improvement in patient care and implement change for the better at a large tertiary care medical institution.

Program Evaluation and Improvement Committee (PEIC)

In ACGME-accredited programs, the Program Evaluation Committee offers an opportunity for continuous program improvement. To more thoroughly fulfill the responsibilities, our medicine residency program of >80 residents comprises its evaluation committee of 20 representatives who help to identify opportunities for program improvement. In ACGME-accredited programs, the Program Evaluation Committee offers an opportunity for continuous program improvement. To more thoroughly fulfill the responsibilities, our medicine residency program of >80 residents comprises its evaluation committee of 20 representatives who help to identify opportunities for program improvement. These residents participate in working groups to implement/evaluate interventions. Thus, our Committee is renamed the "Program Evaluation and Improvement Committee." In our program, the PEIC serves as a major interface of residents with program leadership. All residents and interns in the program are encouraged to bring opportunities or creative interventions for program improvement to the PEIC for discussion. The PEIC then forms working groups to methodically tackle the specific areas for improvement. With 10-12 meetings per year, PEIC serves as a chance to educate and train residents on the application of Improvement Science and Change Management principles to maximize chances for success in achieving SMART aims. This past year, the committee has been focusing on the Medical Teaching Services, to maximize the educational experience, as well as wellness activities to promote camaraderie among residents and staff.

Diversity Equity and Inclusion





The members of the Internal Medicine Residency Program Leadership are committed to promoting diversity, equity, and inclusion within the residency program. We fully endorse the diversity statement put forth by Cooper's Graduate Medical Education program (see page 15). We also feel that it is important to outline the specific ways we are working to foster a culture of diversity and inclusion within our program

- · Resident and Faculty leadership and participation in the GME Diversity Board and Council.
- New DEI curriculum, created by Dr. Hassinger, incorporated into noon conferences.
- Grand Rounds curriculum focusing on diversity, equity and inclusion.
- Conducting a holistic review of applicants with a focus on applicants who have a specific interest in taking care of our diverse and underserved community.
- Offering the opportunity for applicants who identify as under-represented minorities to speak with resident/faculty mentors during recruitment.
- Formal reporting system for microaggressions hospital-wide
- Giving back to our community through regular community service events coordinated by Cooper Medical School of Rowan University (CMSRU).
- Participating in a gender equity memorandum of understanding with other programs in the region this includes a commitment to proactively disseminate our parental leave policy (pa-acp.org/page/).

How to Apply



Contact Information

Program Administrators:

Laura Chropka

Terry Mortka

Jessika Eggert

Phone:

856.342.2000

Ext. 1009646, 1009640,

or 1009506

Medical Student Education Coordinator:

Betty Ann Girouard

Phone:

856.757.7842

Email:

CooperIMProgram@cooperhealth.edu

Website:

www.cooperhealth.edu/ residencies/internal-medicine

Address:

Cooper University Health Care
Internal Medicine Education Programs
101 Haddon Avenue, 3rd floor,
Suite 304
Camden NJ, 08103

The Internal Medicine Residency at Cooper Medical School of Rowan University/Cooper University Hospital Program participates in the Electronic Residency Application Service (ERAS), and all information is processed through this system without exception. Information regarding the ERAS application process and timeline is available on the website below. All positions will be offered through NRMP; participation with the National Residency Matching Program required.

Interviews are by invitation only and are scheduled from November through January.

Association of American Medical Colleges

www.aamc.org/eras

ERAS applications must contain the following information in order for your application to be considered

- · Common application form
- Three original letters of recommendation
- Dean's letter (MSPE)
- Medical school transcript
- USMLE/COMLEX Scores (Parts 1 and 2)
- Personal statement describing your training goals and future career plans

Program Eligibility

Applicants must be U.S. citizens, classified as resident aliens; or, sponsorship of J-1 Visa ONLY.

Deadline for submission of complete application via ERAS is October 10th.

All applications are screened by our Selection Committee. Interviews are granted by invitation only via ERAS. NO paper applications accepted.

USMLE/COMLEX passing scores are required on both Steps I and II on first attempt.

Six months of U.S. clinical experience is desired. Recent medical school graduates (within the past five years) are preferred as well.

The Cooper GME Experience



at Cooper and hear from
current residents at
CooperHealth.edu/GME
and
CooperHealth.edu/Diversity



Cooper University Health Care takes pride in its ability to offer a comprehensive array of diagnostic and treatment services. Cooper University Hospital serves as southern New Jersey's major tertiary care referral hospital for specialized services. Cooper Premier Institutes, Centers of Excellence, and programs include: MD Anderson Cancer Center at Cooper, Surgical Services Institute, Adult Health Institute, Cooper Heart Institute/Cardiac Partners at Cooper and Inspira, Cooper Bone and Joint Institute, Cooper Neurological Institute, Women's and Children's Health Institute, Urban Health Institute, Center for Population Health, Center for Critical Care Services, Center for Urgent and Emergent Services, and the Center for Trauma Services, which includes our Level I Trauma Center, Level II Pediatric Trauma Center, and active community trauma prevention education.

Cooper has been a cornerstone in Camden for more than 130 years and has expanded its facilities and services throughout South Jersey. Cooper has been nationally recognized for its leadership in patient safety, receiving the 2019 Patient Safety Excellence Award™ from Healthgrades, placing it among the top 5% of hospitals in the nation. Cooper was also recognized as a high-performing hospital for treating heart failure and COPD by U.S. News & World Report's 2019-2020 Best Hospital Survey.

Cooper's commitment is to provide exceptional care to every patient, every day, in a patient-centered, family-focused environment. Every employee—including our residents and fellows—is a member of the care-giving team and has an important role in making the experience at Cooper a healing one for patients and their families.

Your training at Cooper will be academically challenging, enhanced by our top-ranked faculty and state-of-the-art equipment and facilities. We welcome the opportunity to have you as part of our team, as we provide university-quality health care in southern New Jersey.

Diversity Statement

The Graduate Medical Education programs of Cooper University Health Care is committed to providing a supportive environment that allows all members of its academic community to thrive and succeed. We work to recruit a diverse group of residents and fellows, and celebrate the multiple dimensions represented in our community, including, but not limited to race, creed, ethnicity, sexual orientation, gender identity, ability, or age. We recognize the importance of monitoring the outcomes of our diversity efforts so that we can better reflect the diversity of our patients and community. Through our GME Diversity Council, we promote on-going exploration of our own biases while also providing education on discrimination and anti-racism. We provide a safe space for residents to engage in dialogue, learn, and contribute to their fullest potential. We seek opportunities to enrich our community through volunteerism and to effect lasting change through engagement with local leaders.

We are proud. We are diverse. We are Cooper.

Off Campus Highlights



Just across the bridge from bustling Philadelphia, and less than an hour from the tranquility of the Pine Barrens and activity of the Jersey shore, Cooper University Hospital is easy to access. The academic campus is located across the street from two commuter rail lines (PATCO and NJ Transit's River Line) and within walking distance of Rutgers University and Rowan University Camden campuses.

The Cooper Health Sciences Campus is located in the heart of Camden's business district. The academic medical center campus is easily accessible by car or public transportation via the commuter high-speed line and bus terminal adjacent to the hospital.

Cooper is a short walk or drive from the exciting Camden waterfront, which includes a magnificent waterfront park and marina; the Adventure Aquarium; and the BB&T amphitheater, which hosts nationally renowned entertainment throughout the year. Nearby are the Sixers Training Complex, L3 Communications complex, Lockheed Martin, Rutgers University Camden Campus, and Camden County College.

There are expected to be \$350M in transportation and infrastructure improvements within the next four to five years to handle the influx of thousands of new employees to the area and students at nearby growing academic campuses.

Cooper is conveniently close to Philadelphia. Just a mile-long drive over the Benjamin Franklin Bridge will put you at the doorstep of Philadelphia's cultural, culinary, and historic venues. South Jersey also offers a range of living and entertainment options. Quaint towns such as Haddonfield and Collingswood are just 10 minutes away. The lights and action of Atlantic City and popular beach towns such as Cape May and Ocean City are a one-hour drive from Cooper.

Cooper Camden Campus Map



The most up-to-date directions to Cooper University Hospital are available at: CooperHealth.org/Locations













One Cooper Plaza · Camden, NJ 08103-1489 · CooperHealth.edu

Hospital Main Number: **856.342.2000** Graduate Medical Education: **856.342.2922**