Psychiatry Residency Education and Training Program

2018-2019 Residency Program Web Brochure
Educating and Training Residents since 1941

Creedmoor Psychiatric Center
A Component of the
New York State Office of Mental Health
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Executive Director’s Introduction

Creedmoor benefits enormously from having the Residency Training Program. For over thirty years, the Program has been an example of a successful public-private partnership between the New York State Office of Mental Health (OMH) and Columbia University, utilizing the strengths of both. Resident staffed units include the Intensive Treatment Unit, a twenty-six-bed inpatient unit offering excellent care for patients with challenging clinical issues, and the Queens Village/Jamaica Wellness and Recovery Center. Opportunity to participate in quality improvement initiatives rounds out the experience. Our Grand Rounds Program and the Columbia University Medical Students’ rotations offer further opportunities for advancing quality of care at Creedmoor.

The entire facility benefits from the presence of the Residency Program, and its parent department, the Department of Medical Education. The presence of Residents fosters an academic atmosphere, an atmosphere of clinicians committed to the highest level of care possible for our patients.

Other activities of the Department, including the Grand Rounds Program, and the Columbia University Medical Student rotations, all contribute to both maintaining and advancing the quality of care at Creedmoor. A measure of the facility’s confidence in the Residency Program has been the number of graduates hired by Creedmoor. We are proud of the program and continue to work to make it the finest public psychiatry program in New York. Our graduates are sought after by the public sector and voluntary behavioral health centers across the country as well as the New York State Office of Mental Health system.

Effectively guided by the Department of Medical Education, the Creedmoor Residency Program provides an outstanding public psychiatry experience with a diverse patient population, a highly professional staff and a broad array of clinical and organizational opportunities.

Welcome to one of the finest public psychiatry programs in the United States.

Martha Adams Sullivan, DSW, MA

Executive Director
Welcome from the Medical Education team:

Our mission at the Creedmoor Psychiatric Residency Training Program is to provide a clinically rich training experience that produces psychiatrists with the compassion, integrity, and excellence necessary to care for all individuals who are in need of psychiatric services.

Located in the New York City borough of Queens, one of the most ethnically diverse counties in the United States, Creedmoor Psychiatric Center has been involved in residency education and training in psychiatry for over 75 years. It is the only psychiatry residency program entirely sponsored by the New York State Office of Mental Health (OMH). The current program is the work of many years of generous support from our administration and sustained effort by faculty and residents to make a dynamic, comprehensive, and nurturing program designed to produce ethical, skilled, competent psychiatrists ready to pursue a variety of career paths.
A Brief History: Creedmoor Psychiatric Center and the Psychiatry Residency Training Program

The land grant site where Creedmoor Psychiatric Center is currently located was deeded to New York State by the Creed family in 1870 for its use as a rifle range by the New York State National Guard. Bullets coming too close to the developing Queens community eventually led the state to close the range. In 1908 the state legislature made the site available for the construction of a state mental hospital. After much review and planning, the “Farm Colony of Brooklyn State Hospital” opened on July 1, 1912 with 32 patients. The New York State Legislature authorized funds for an expanded Creedmoor Division of Brooklyn State Hospital in 1922, and patients were first admitted in 1926. In 1935 Creedmoor became an independent state facility. At one time with an inpatient population of more than 7,000, Creedmoor now treats approximately 330 inpatients and 1500 outpatients. Creedmoor Psychiatric Center has a long history of providing a broad range of treatments and services for its patients.
Overview: Faculty and Training Sites

We offer a broad range of training experiences at our primary teaching site, Creedmoor Psychiatric Center, and at each participating site:

- Columbia University Medical Center (recently renamed Columbia University Irving Medical Center-CUIMC)/New York Presbyterian Hospital
- Queens Hospital Center, a New York City Health and Hospitals Corporation facility
- Jewish Board of Family and Children’s Services-Pride of Judea Community Services
- New York City Children’s Center-Queens Campus, OMH
- Creedmoor Addiction Treatment Center, New York State Office of Alcoholism and Substance Abuse Services (OASAS)
- St. John’s Episcopal Hospital South Shore in Queens

With such a range of psychiatric patient care experience and faculty expertise, our graduating residents have the tools needed to pursue any career path of their choosing. The breadth of exposure to a range of psychiatric subspecialties and strong foundational psychiatric training is reflected in the variety of fellowships and job placement opportunities that our graduates pursue. Recent graduates have achieved fellowship placement in the subspecialties of consultation-liaison psychiatry, child-adolescent psychiatry, and geriatrics at top institutions, and others have chosen to begin their clinical careers at Creedmoor Psychiatric Center, Columbia University Irving Medical Center, the New York State Psychiatric Institute, and beyond.

The Creedmoor program provides for a comprehensive curriculum taught primarily at Creedmoor Psychiatric Center and at the Columbia University Irving Medical Center (CUIMC)/New York Presbyterian Hospital. Our other clinical sites offer additional coursework that is complementary both to the clinical work at those sites and with the educational programming offered at our two primary coursework sites.
Overview: Faculty and Training Sites

Four residents are selected for the program in the first year. Our program is built around a four-year curriculum and training model, and thus residents are expected to complete the full four-year program. The intimate size of our residency program allows for individualized attention to optimize trainees’ clinical and personal growth.

The Creedmoor Psychiatry Residency Program emphasizes a systematic integration of psychodynamic, biologic, family and community disciplines. To achieve this goal both clinical and didactic training draw upon the very broad spectrum of clinical and scientific expertise among the faculty. Residents are each assigned a set of clinical supervisors for individual, family and group therapy in addition to a unit supervisor for each training component at Creedmoor. As the education and training progresses, residents receive advanced clinical supervision that includes supportive, expressive psychoanalytic, group, and family therapy, psychopharmacologic expertise, and social systems intervention and organizational consultation. Most of our residency education and training sites are under the direction of attending psychiatrists holding Columbia University appointments.

Didactic instruction includes courses, seminars and case conferences. These are coordinated with clinical training to expand the residents’ practical experience through guided readings and discussion of the psychiatric literature. Courses in psychotherapy and psychoanalytic theory are organized through the Columbia University Center for Psychoanalytic Training and Research. Other Columbia University faculty teaches courses in psychopharmacology, eating disorders, human sexuality, emergency psychiatry, legal and forensic issues, addiction psychiatry, and public psychiatry. Didactic instruction is generally organized in three-year sequences to provide integrated and continuous coursework in these areas.

Knowledge in psychiatry includes basic neuroscience and neuropsychologic and neurophysiologic assessment, advanced work in psychological development and behavior, and the study of larger social systems. The Creedmoor curriculum, taught by Creedmoor Psychiatric Center, Columbia University, and other faculty, includes all of these areas and offers a comprehensive program of psychiatry training. Exploration of particular areas of interest is encouraged with the ultimate goal of developing individual career objectives for each resident.

The academic year 2017-2018 ushered in opportunities for more acute psychiatric care training to occur earlier in the residency program, including rotations on the Creedmoor Admission Units, the CUIMC Comprehensive Psychiatry Emergency Program, and St. John’s Geriatric Psychiatry inpatient unit for residents in the PGY-1 and PGY-2 years. With the restructuring of the PGY-1 and PGY-2 rotation schedule, the option of exploring fellowship and research possibilities in the PGY-4 year has been expanded with an additional month of elective time.
The PGY-1 Year

In the PGY-1 year, residents build on their foundational medical, neurological, and psychiatric knowledge base. Residents complete four months of inpatient internal medicine and two months of neurology, followed by six months of psychiatry. The length of the inpatient psychiatry rotation is dependent on whether the addiction psychiatry rotation is scheduled during the PGY-1 or PGY-2 year. Residents participate in coursework associated with each of these rotations to further bolster their learning experience at each site.

Queens Hospital Center (QHC)

Queens Hospital Center is a New York City Health and Hospitals Corporation (HHC) facility whose public mission complements that of OMH’s Creedmoor Psychiatric Center, the state psychiatric center for Queens. QHC has an academic affiliation with Mt. Sinai. Residents complete their internal medicine and neurology rotations at QHC.

Intensive Treatment Unit (ITU), Creedmoor Psychiatric Center

All PGY-I residents begin with two months of education and training in inpatient psychiatry on the Intensive Treatment Unit (ITU) at Creedmoor. At the ITU, patients’ psychiatric illness is assessed and treated under close supervision of the Chief Psychiatrist, other attending psychiatrists, and specially trained clinical staff experienced in working with this challenging patient population. The resident learns to delineate the role of the psychiatrist within a collaborative team, whose shared mission is to negotiate the complex biological, cultural, and psychological issues associated with each patient. While assigned to the ITU, residents will also have a part-time experience with the Creedmoor Psychiatric Center Intensive Care Management Program/Care Coordination Team. In this program, residents work with outpatients identified as requiring additional support to maintain themselves in the community. Care Coordination Team activities comprise a comprehensive service linking patients to psychiatric care, medical care, financial assistance, housing assistance and provision of food and clothing, and any other identified needs of the patient. The resident also has a part-time experience on the Electroconvulsive Therapy (ECT) Service, and on the Forensic/Court clinical experience working alongside the Creedmoor Court Consultant in addition to attending Hospital Forensic Committee meetings weekly.

The ITU also serves as a site for education and training for Columbia University College of Physicians and Surgeons (P&S) second and third year medical students. Two or three medical students are each assigned to five-week blocks comprising eight rotations per academic year. Medical students present a clinically pertinent topic to the on-site Creedmoor residents and faculty during the last week of the medical student rotation at the weekly Wednesday resident lunch meeting.
Admissions Unit, Creedmoor Psychiatric Center

During the two-month Admissions Unit Assignment, residents work alongside with one of the Creedmoor attending psychiatrists as a member of the Admissions Unit clinical team. More acutely ill patients are directly admitted to the Unit. Those residents not having this experience in the PGY-1 year will have it in the PGY-2 year.

Creedmoor Addiction Treatment Center (OASAS)

Two PGY-1 residents will have a two-month clinical assignment in addiction psychiatry at the Creedmoor Addiction Treatment Center, gaining experience with psychosocial treatments, medication assisted therapies, and other drug abuse treatments. Those not having this assignment in the first year will have it in the PGY-2 year.
The PGY-2 Year

During this year, residents acquire an understanding of the possible origins, clinical course and treatment of psychiatric illness. Residents continue to hone their inpatient psychiatric skills, begin to work on outpatient skills, and learn management of acutely ill psychiatric patients in the emergency room setting. In addition to ongoing classroom study, residents receive regular individual case supervision, participate in multidisciplinary treatment team meetings, and attend case conferences with Columbia and Creedmoor faculty discussants. They attend Grand Rounds at Creedmoor.

Intensive Treatment Unit (ITU), Creedmoor Psychiatric Center

While assigned to the ITU, residents will also have a part-time experience with the Creedmoor Psychiatric Center Intensive Case Management Program/Care Coordination Team. In this program, residents work with outpatients identified as requiring additional support to maintain themselves in the community. Care Coordination Team activities comprise a comprehensive service linking patients to psychiatric care, medical care, financial assistance, housing assistance and provision of food and clothing, and any other identified needs of the patient. The resident also has a part-time experience on the Electroconvulsive Therapy (ECT) Service, and on the Forensic/Court clinical experience working alongside the Creedmoor Court Consultant in addition to attending Hospital Forensic Committee meetings weekly.

9-Garden North (9GN) Inpatient Psychiatry Unit, Columbia University Irving Medical Center

PGY-2 residents rotate on the 9GN inpatient psychiatry unit at CUIMC for three months where they learn to treat acutely ill psychiatric patients with a broad spectrum of diagnoses, socioeconomic background, and culture. Their clinical work is closely supervised by Columbia 9GN faculty, with the opportunity to have expert psychopharmacologic consultations on treatment-resistant or complex cases, and involvement with ECT patient consultation and treatment.

Creedmoor Addiction Treatment Center (OASAS)

Residents will be assigned to complete their two-month addiction psychiatry rotation during the PGY-2 year, if they have not completed this rotation in the PGY-1 year. Residents gain experience with psychosocial treatments, medication assisted therapies, and other drug abuse treatments.

Geriatric Psychiatry, St. John’s Episcopal Hospital, South Shore in Queens

Residents will have the required month-long clinical assignment in Geriatric Psychiatry under the supervision of geriatric psychiatry attendings.
Admissions Unit, Creedmoor Psychiatric Center

During the Admissions Unit/Combined Assignment, residents are assigned to work along with Creedmoor attending psychiatrists on the Admissions Unit, where more acutely ill patients are admitted. Those residents who have not completed the Admissions Unit rotation during the PGY-1 year will be assigned this rotation in the PGY-2 year.

Eye-6 Outpatient Psychiatry Clinic, CUIMC/New York Presbyterian Hospital

Halfway through the PGY-2 year, residents begin their outpatient experience at the Eye-6 clinic performing intake evaluations under the supervision of the Creedmoor Associate Residency Training Director and four New York State Psychiatric Institute/Columbia fellows with expertise in areas including schizophrenia, addiction psychiatry, and mood disorders. Residents learn how to efficiently and effectively lead outpatient diagnostic evaluations and develop initial treatment plans in collaboration with the evaluation team, which meets each Friday morning.

New York City Children’s Center-Queens Campus (OMH)

PGY-2 residents spend two months in this rotation, working with children of different ages as they rotate through the inpatient, school-based and/or day treatment services.

Comprehensive Psychiatric Emergency Program (CPEP), Columbia University Irving Medical Center

Residents rotate through the CUIMC CPEP for one month. This experience will include crisis management of patients and assessment for safety and hospital admission.
The PGY-3 Year

During this year resident training is focused on management of outpatient psychiatry patients. With the diversity of outpatient training sites in the Creedmoor Residency Program, residents have the opportunity to treat patients with a wide range of psychopathology including persistent psychotic and mood disorders, anxiety disorders, acute or new onset of psychiatric symptomatology, and dual diagnosis. Resident caseloads include patients with a broad spectrum of socioeconomic and cultural backgrounds. Residents are well supervised with experienced clinicians at each of the main outpatient sites, in addition to weekly long-term therapy case supervision.

In each of the outpatient settings, residents assume primary roles in the outpatient management of patients and gain supervised clinical experience in individual, group and family therapy.

Queens Village Jamaica Wellness and Recovery Center (QVJWRC), Creedmoor Psychiatric Center

Queens Village Jamaica Wellness and Recovery Center offers programs to facilitate the patient’s reintegration into community life. The larger of Creedmoor’s two Wellness and Recovery Centers, QVJWRC offers comprehensive treatment services for both psychotic and non-psychotic disorders, and special programs for family and group therapy and psychopharmacologic approaches to personality disorders, anxiety disorders, and depressive disorders. Residents are intimately involved in the full spectrum of patient care with individual supervision for all modalities of treatment and social intervention programs. Residents evaluate patients under the supervision of an on-site attending psychiatrist and present their evaluations at the weekly staff meeting, with the possibility of treating appropriate evaluation patients. Resident caseloads are monitored both for numbers and for characteristics so as to help ensure a variety of experience. Residents are assigned to QVJWRC for eleven months, part-time, spending one month outside of QVJWRC during the CUIMC CPEP rotation assignment.

Eye-6 Outpatient Psychiatry Clinic, New York Presbyterian Hospital/CUIMC

Residents continue performing outpatient evaluations for the first half of the PGY-3 year gaining confidence in their evaluation and diagnostic skills, and then commence with long-term treatment of psychotherapy cases under the supervision of Columbia faculty at Eye-6.

The Jewish Board of Family and Children’s Services’ Pride of Judea Community Services

Residents acquire education and training with a different outpatient population than served at Creedmoor or the NYPH Eye-6 Clinic. Residents perform intake evaluations and have the opportunity to treat patients with the following modalities under the supervision of Pride of Judea staff: individual therapy, psychopharmacology, crisis intervention, cognitive behavioral therapy,
and dual diagnosis treatment. Patients range in age from 6 to 70+, with the majority (64%) in the 18-59 years old range. Diagnostic categories include: Affective disorders (45%), Anxiety Disorders (24%), Personality Disorders (18%), and Schizophrenia (13%). Each resident treats five to six children under supervision of a board certified child psychiatrist.

*Comprehensive Psychiatric Emergency Program (CPEP), CUIMC*

Residents rotate through the CUIMC CPEP for one month during the PGY-3 year. Clinical experience includes crisis management of patients and assessment for safety and hospital admission, and honing leadership skills managing patients in the Emergency Room setting.
The PGY-4 Year

Chief Resident

A unique opportunity that each Creedmoor Psychiatry Resident experiences in their PGY-4 year is the role of Chief Resident. Each resident spends three months, part-time, as a Chief Resident on the Intensive Treatment Unit (ITU) providing supervision and teaching to junior residents and medical students, and working closely with the ITU Chief Psychiatrist and Medical Education on administrative tasks. The Chief Resident participates in institutional and departmental, and medical education committees, in addition to working with the Director of Residency Training on special projects. Resident exposure to the inner workings of several levels of administration provides a unique opportunity for residents to learn about both management of acute administrative challenges and maintenance of the ongoing functioning of a system.

Consultation-Liaison Service, Columbia University Irving Medical Center (CUIMC)

Residents spend four months part-time on the CUIMC Consultation-Liaison (CL) Service. While interacting with virtually all the other medical specialties within this major university teaching hospital, residents learn the critical role of the psychiatrist as consultant to patients and staff. The CL experience includes a didactic seminar series on a variety of topics relevant to CL Psychiatry. While some residencies have moved their CL assignments into the PGY-2 year where it serves as a transition between internal medicine and neurology and psychiatry, we at the Creedmoor Residency Program continue to see CL as a culminating experience during which residents bring to bear the training and education of three or more years. At this advanced point in residency training, PGY-4 residents offer their skill and experience to the practitioners of other medical and surgical specialties, and to their patients.

Eye-6 Outpatient Psychiatry Clinic, New York Presbyterian Hospital/CUIMC

Residents continue their outpatient clinical work at the Eye-6 Clinic, year-long, part-time, with a focus on longer-term patient care, including management of long-term treatment (LTT) and brief therapy patients, combined psychopharmacology/therapy individual cases, and group therapy work.

Geriatric Psychiatry, St. John’s Episcopal Hospital, South Shore in Queens

Residents will have a required one month clinical assignment in Geriatric Psychiatry. St. John’s is available as a selective site, although residents may choose other sites with department approval. Beginning with the Class of 2020, residents will rotate in geriatric psychiatry at St. John’s in the PGY-2 year, thereby allowing for an additional elective month in the PGY-4 year.

Electives

Residents have the opportunity to spend up to 4 part-time months of elective time during their PGY-4 year during which they can explore and develop their professional interests in preparation for graduation. Beginning with the Class of 2020, residents will have an additional month of elective time.
Residents have chosen a variety of elective sites through the years, which have included (but are not limited to) the following:

Columbia University Irving Medical Center (CPEP and Child and Adolescent Outpatient and Emergency Psychiatry)

Northwell Health/Long Island Jewish Medical Center (Geriatric and Consultation-Liaison Psychiatry)

New York University/Bellevue Hospital Center (Forensics)

Stony Brook (Geriatric and Consultation-Liaison Psychiatry)

Mount Sinai (Research)

John Jay College of Criminal Justice

Creedmoor Psychiatric Center Specialty services (ECT, Forensics, Assertive Community Treatment (ACT) Team)

New York State Psychiatric Institute (Gambling Disorder and Psychoanalytic Therapy Scholarly Work)

South Beach Psychiatric Center (ACT Team)
### The PGY-1 Year (2018-2019)

<table>
<thead>
<tr>
<th>4 Months</th>
<th>2 Months</th>
<th>2 Months</th>
<th>0, 2, or 4 Months</th>
<th>0 or 2 Months</th>
<th>0 or 2 Months</th>
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<tbody>
<tr>
<td>Internal Medicine</td>
<td>Neurology</td>
<td>Neurology</td>
<td>Inpatient Psychiatry</td>
<td>Inpatient Psychiatry</td>
<td>Addiction Psychiatry</td>
</tr>
<tr>
<td>Queens Hospital Center</td>
<td>Queens Hospital Center</td>
<td>ITU Creedmoor ITU Creedmoor</td>
<td>{Persistently Ill}</td>
<td>80-100% Time</td>
<td>{Persistently Ill}</td>
</tr>
<tr>
<td>100% Time</td>
<td>100% Time</td>
<td>100% Time</td>
<td>100% Time</td>
<td>100% Time</td>
<td>100% Time</td>
</tr>
<tr>
<td>Care Coord. Team</td>
<td>ECT Service</td>
<td>Forensic/Court Clinical Assignment</td>
<td>10% Time</td>
<td>10% Time</td>
<td>20% Time</td>
</tr>
<tr>
<td>1 month</td>
<td>1 month</td>
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All PGY-1 residents start together at Queens Hospital Center where they will spend the first 6 months of the year completing their internal medicine and neurology rotations.

Since the 2016-2017 academic year, we have reconfigured the PGY-1 and PGY-2 years and view an 18-month continuum of training to begin January of the PGY-1 year and end June of the PGY-2 year with the following rotations: 7 months on the Creedmoor Psychiatric Center (CPC) Intensive Treatment Unit (ITU); 2 months on the CPC Admissions Unit; 2 months on the Addiction Psychiatry Service at the Creedmoor Addiction Treatment Center (ATC); 1 month in Geriatric Psychiatry at St. John’s Episcopal Hospital; 3 months on the Columbia University Irving Medical Center (CUIMC) New York Presbyterian Hospital (NYPH) 9-Garden North (9-GN) Inpatient Service; 2 months at the New York City Children’s Center (NYCCC) Child and Adolescent Psychiatry; and 1 month on the CUMC CPEP (Comprehensive Psychiatric Emergency Program/psychiatry emergency room).

All four PGY-1 residents will begin the CPC Intensive Treatment Unit (ITU) rotation in January of the PGY-1 year, where they will work together for 2 months. During the remainder of the PGY-1 year, one PGY-1 resident will continue work on ITU for an additional 4 months. Two PGY-1 residents will have an additional 2 months on ITU during the PGY-1 year; and one resident will rotate for 2 months on the Admissions Unit and the other will rotate at ATC for 2 months. The fourth resident will rotate for 2 months on Admissions and for 2 months on ATC during the PGY-1 year, and will have an additional 5 months on ITU during the PGY-2 year. All residents will have three part-time linked clinical assignments while rotating on ITU during the PGY-1 or PGY-2 year: the ECT Service, the Care Coordination Team (formerly known as Intensive Case Management), and the Forensic/Court Service.
## The PGY-2 Year (2018-2019)

<table>
<thead>
<tr>
<th>1,3, or 5 Months</th>
<th>0 or 2 Months</th>
<th>3 Months</th>
<th>0 or 2 Months</th>
<th>1 Month</th>
<th>2 Months</th>
<th>1 Month</th>
</tr>
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<tbody>
<tr>
<td>Inpatient Psychiatry ITU Creedmoor (Persistently Ill)</td>
<td>Inpatient Psychiatry Admissions Unit Creedmoor (More Acutely Ill)</td>
<td>9-Garden North CUIMC New York Presbyterian Hospital (Acutely Ill)</td>
<td>Addiction Psychiatry Creedmoor Addiction Treatment Center (More Acutely Ill)</td>
<td>Geriatric Psychiatry St. John’s Hospital</td>
<td>Child Psychiatry, New York City Children’s Center (NYCCC)-Queens Campus</td>
<td>CUIMC CPEP (Psychiatric Emergency Room)</td>
</tr>
<tr>
<td>80-100% Time, first half of the year</td>
<td>100% time if in the first half of the year, 90% time if in the second half of the year</td>
<td>100% Time if in the first half of the year, 90% Time if in the second half of the year</td>
<td>100% Time if in the first half of the year, 90% time if in the second half of the year</td>
<td>100% Time if in the first half of the year, 90% Time if in the second half of the year</td>
<td>90% Time, Second half of the year</td>
<td>90% Time, Second half of the year</td>
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<tr>
<th>Forensic/Court Coord. Team</th>
<th>ECT Service</th>
<th>Forensic/Court Clinical Assignment</th>
</tr>
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<tbody>
<tr>
<td>10% Time 1 month</td>
<td>10% Time 1 month</td>
<td>20% Time 1 month</td>
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During the PGY-2 year, residents will complete their clinical assignment on the Creedmoor Psychiatric Center (CPC) Intensive Treatment Unit (ITU). While assigned to the CPC ITU in the PGY-1 or PGY-2 year, residents will have three part-time linked clinical assignments: the ECT service, the Care Coordination Team, and the Forensic/Court Service. Three residents not having had the CPC Admissions Unit rotation or the ATC rotation, or both, in the PGY-1 year, will rotate at the assignment(s) in the PGY-2 year. All PGY-2s have a 3-month clinical assignment in acute adult inpatient psychiatry at the Columbia University Irving Medical Center’s 9-Garden North (9-GN) Inpatient Psychiatry Unit where they will have the opportunity to work with experts in the fields of acute inpatient psychiatry and psychopharmacology. All residents spend 1 month on the Geriatric Psychiatry rotation at St. John’s Episcopal Hospital. In the second half of the year, all residents will have a clinical assignment in Child and Adolescent Psychiatry at the New York City Children’s Center, a New York State Office of Mental Health (OMH) facility neighboring Creedmoor Psychiatric Center. All PGY-2 residents will be assigned to the CUIMC CPEP for 1 month during the second half of the PGY-2 year. All PGY-2 residents spend one year, part-time, in the CUIMC/NYPH EYE-6 Adult Outpatient Psychiatry Evaluation Clinic beginning in the second half of the PGY-2 year, and continuing through the first half of the PGY-3 year.
### The PGY-3 Year (2018-2019)

<table>
<thead>
<tr>
<th>11 Months</th>
<th>1 Month</th>
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<tr>
<td><strong>Adult Outpatient Psychiatry:</strong>&lt;br&gt;Queens Village/Jamaica Wellness and Recovery Center&lt;br&gt;Creedmoor Psychiatric Center</td>
<td>CPEP at CUIMC</td>
</tr>
<tr>
<td>11 Months at 50% Time&lt;br&gt;{Persistently Ill}</td>
<td>1 Month at 80% Time&lt;br&gt;{Acutely Ill}</td>
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<tr>
<td><strong>Outpatient Psychiatry</strong>&lt;br&gt;Jewish Board of Family and Children’s Services’&lt;br&gt;Pride of Judea Mental Health Center</td>
<td></td>
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<tr>
<td>11 months at 30% time&lt;br&gt;{More Acutely Ill}</td>
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<tr>
<td><strong>Adult Outpatient Psychiatry</strong>&lt;br&gt; EYE-6 CUIMC/NYPH</td>
<td>Adult Outpatient Psychiatry&lt;br&gt; EYE-6 CUIMC/NYPH</td>
</tr>
<tr>
<td>6 Months Evaluation at 20% time&lt;br&gt;{More Acutely Ill}</td>
<td>6 Months Outpatient at 20% time&lt;br&gt;{More Acutely Ill}</td>
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The PGY-3 year is an outpatient year. Our residents work throughout the year at three outpatient settings: the Creedmoor Psychiatric Center Queens Village/Jamaica Wellness and Recovery Center, the CUIMC/NYPH EYE-6 Adult Outpatient Psychiatry Clinic, and the Jewish Board of Family and Children’s Services’ Pride of Judea Mental Health Center. The three outpatient sites give residents a broad exposure to a variety of patients culturally, diagnostically, and socio-economically, as well as experience in different forms of health care organizations. Residents have a 1-month part-time clinical assignment at the CUIMC CPEP (psychiatric emergency room). As noted in the PGY-2 table on the previous page, residents spend one year, part-time, in the CUIMC EYE-6 Adult Outpatient Psychiatry Evaluation Clinic (EYE-6 Eval), beginning in the second half of the PGY-2 year, and continuing through the first half of the PGY-3 year. Clinical assignment at the Adult Outpatient Psychiatry Eye-6 Clinic, where residents treat both short- and long-term patients, starts immediately following the conclusion of the EYE-6 evaluation clinic and will continue part-time throughout the PGY-4 year.
## The PGY-4 Year (2018-2019)

<table>
<thead>
<tr>
<th>4 Months</th>
<th>3 Months</th>
<th>1 Month</th>
<th>4 Months</th>
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</thead>
<tbody>
<tr>
<td>Consultation-Liaison Psychiatry</td>
<td>Senior (Chief) Resident/ Administrative Psychiatry</td>
<td>Geriatric Psychiatry</td>
<td>Electives</td>
</tr>
<tr>
<td>CUIMC/NYPH</td>
<td>{Creedmoor ITU}</td>
<td>1 Month at 80% Time</td>
<td>4 Months at 80% Time</td>
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<tr>
<td>4 Months at 80% Time (More Acutely Ill)</td>
<td>3 Months at 80% Time</td>
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<td>EYE-6 Adult Outpatient Psychiatry Clinic (CUIMC/NYPH)</td>
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<td>EYE-6 Adult Outpatient Psychiatry Clinic (CUIMC/NYPH)</td>
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<td></td>
<td>12 Months at 20% Time (More Acutely Ill)</td>
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</table>

During the PGY-4 year residents have a 4-month clinical assignment with the CUIMC Psychiatry Consultation Liaison Service. Here they work alongside Columbia University Psychiatry Residency Program PGY-2 residents. All residents serve as Senior (Chief) Resident for 3 months, during which they work in administrative, supervisory, teaching, and committee assignments. All PGY-4 residents have a 1-month clinical assignment in Geriatric Psychiatry. Residents have 4 months available for elective work, often choosing both topical and geographical areas in which they are considering post-residency fellowships. Throughout the PGY-4 year, residents continue with their outpatient assignment part-time at the CUIMC EYE-6 Adult Outpatient Psychiatry Clinic.

Projecting to the 2019-2020 academic year, the residents in the Class of 2020 will have an additional elective month in which to consider post-residency fellowships and/or research opportunities, as they completed the Geriatric Psychiatry assignment during the PGY-2 year.
A Day in the Life of a Creedmoor Psychiatry Resident

My name is Shawn Gulati and I’m proud to be a trainee at Creedmoor Psychiatric Center. Our program has been educating and training residents since 1941. As PGY-4 residents, we each have the opportunity to be Chief Resident for three months. During my experience as Chief, I’ve learned valuable skills in leadership, teaching and how to further develop the traits required to become a life-long learner, physician and psychiatrist.

My day begins at morning rounds on the ITU (Intensive Training Unit) where we started as PGY-1’s. This is where we first encounter patients with chronic and severe psychopathology. The return to the ITU marks a transition from being a junior resident to becoming a leader along with the Chief Psychiatrist, Treatment Team Leader and the various disciplines that serve our patients on the unit. In addition to supervision for PGY-1 and 2 residents, we teach medical students from Columbia University College of Physicians and Surgeons who spend 5 weeks doing their core rotation with us. Creedmoor faculty also trains junior residents with Work Rounds that are scholarly in nature, and involve case presentation and various psychodynamic concepts that assist the resident in developing a deeper understanding of their patients. The Chief Resident will participate in various Institutional Committees including the Hospital Forensic and Environment of Care Committees and program-related activities to enhance training. Over the course of the week we have clinical team meetings and additional activities for patients including barbeques and the Annual Family Day. Once per month we host Case Conference and bring in a psychiatric consultant to the unit for their fresh perspective to residents’ complex cases. The Chief Resident role also encompasses teaching PRITE (our annual in-service exam) review courses, building question banks and teaching for this exam in preparation for the boards.

On Monday afternoon and Fridays, we have outpatient experiences at the Columbia University Irving Medical Center EYE-6 Adult Outpatient Psychiatry Clinic. Here we see patients in treatments that range from individual long-term psychotherapy cases to psychopharmacology and co-lead evidence-based group therapies like Seeking Safety for PTSD/substance abuse treatment. The Consultation-Liaison service at Columbia University Irving Medical Center is a 4-month immersive experience and lays the foundation to think critically of both medical and psychiatric issues for our patients. The remainder of the year is comprised of elective rotations affording us nearly limitless choices in the field of psychiatry and neurology. One area of training that PGY-2’s and beyond get are courses taught by faculty in the Columbia University Psychoanalytic Center. We are treated to lectures by the people who have “written the book” in our field. These classes are nothing short of amazing.

The roster of supervisors, fellows and teachers that I have worked with at Creedmoor and Columbia is significant. They provide immense support for research and scholarly work during our PGY-2, 3 and 4 years. Residents present their work at Grand Rounds at Creedmoor as well as submit to our local American Psychiatric Association chapter, the Queens County Psychiatric Society. Having additional research opportunities with Columbia faculty is encouraged and will continue to grow in the years ahead.

We reside in the borough of Queens and have the most ethnically diverse patient population in the world. One cannot forget that we are a short trip from world class theater, opera, and art and each of our residents can take up their passions whether it be running marathons, participating in poetry slams, or spending time with family and friends. I’m never surprised to see we have a formal didactic lecture with a gentle reminder to bring yoga mats; we’re fortunate to have physicians like Dr. Richard Brown come teach and work with us on wellness, and the healing power of meditative breathing techniques. The Chief often helps organize gatherings whether for happy hour or “residents only” meetings to discuss issues that come up during training.

While we take our profession seriously and treat some of the most challenging psychiatric population, we also take seriously our desire to keep residents happy, healthy and heard. Our work is meaningful to the health and well-being of our patients and as physicians we have an impact on the community at large. Each day we continue to work together to be mindful of the knowledge we have to help our patients and one another live better lives. I’m fortunate to be at Creedmoor Psychiatric Center for both excellent training and a place that fosters our ability to be well rounded physicians, and I’m proud to be called “doctor” here by our patients.
Core Curriculum

Over the course of their education and training residents participate in seminars, classes, case conferences, and a variety of teaching rounds and other meetings. Coursework is integrated with the residents’ clinical work and provide foundational material covering the scientific basis for clinical practice, diagnosis, and treatment with respect to therapy and psychopharmacologic management of patients, and decision-making in clinical care amongst other key elements of psychiatric training.

The program has adopted an “academic day” on Wednesday mornings throughout the year for PGY-1, PGY-2, and PGY-3 residents, as a time when all residents of a given year gather together at Creedmoor for coursework. Additional coursework is led by specialty staff at our other rotation sites. Attendance at the Creedmoor Grand Rounds, a sophisticated series of programs focused on current issues in psychiatry, is encouraged for all residents who are doing a clinical assignment at Creedmoor Psychiatric Center. Creedmoor is also a viewing site for the New York State Office of Mental Health’s Statewide Grand Rounds program. Creedmoor residents are invited to attend the Columbia University Department of Psychiatry/New York State Psychiatric Institute (NYSPI) Grand Rounds when they are on-site.
PGY-1 Year:

Residents learn foundational material in medicine and neurology during their first year rotation months with didactics and supervision provided at their clinical sites. In the second half of the PGY-1 year, residents begin to build their knowledge base in psychiatric diagnosis, development of psychiatric treatment plans, interview skills including safety and suicide assessments, and medical and emergency aspects of inpatient psychiatric care. Coursework in the second half of the PGY-1 year is held primarily at Creedmoor Psychiatric Center with a combination of classes specifically focused on the PGY-1 level, and others with PGY-2 and -3 levels.

Creedmoor Psychiatric Center Wednesday lecture series:

Introduction to the Psychiatric Interview and the Language of Psychiatry (second half of PGY-1 year and continued into the PGY-2 year)
Residents build their interview skills with classes focused on the mental status examination. Residents rotate in the role as interviewer with real-time supervision in the classroom by senior-level faculty.

Preventing and Managing Crisis Situations
Residents gain tools to both prevent and manage psychiatric emergencies in a series of lectures by experienced specialists in the field. This course is held just following PGY-1 residents’ completion of their neurology and internal medicine assignments in preparation for their initial inpatient psychiatric rotations at Creedmoor Psychiatric Center.

Medicine, Neurology, and Pain in Psychiatric Practice/AIMS Review (PGY-1 year and continued into the PGY-2 and -3 years)
In any clinical setting, residents are often faced with emergency medical situations, pain management, and complex neuropsychiatric manifestations of illness or side effects of psychopharmacological agents. Residents will strengthen their understanding of the interface of psychiatry and neurology in clinical practice.

Specific Psychotherapies and Psychotherapy Skills Test Review
In this course series, residents learn foundational material in family, supportive, and dynamic psychotherapy. PGY-1, -2, -3 residents learn to apply basic psychotherapy knowledge to a written test format. Residents will then add to this knowledge base in the following PGY years in their advanced psychotherapy coursework and supervision.

Legal and Ethical Issues in Psychiatry
Residents learn about pertinent legal and ethical issues in psychiatry including identification and management.
**Theories of Development/Psychological Testing**
Residents will learn about the major theories of human development and psychological testing and how psychological assessment is used to understand psychiatric symptoms and disorders.

**Agitation: Diagnosis and Treatment**
Residents learn about managing agitation in acutely ill patients, from assessment to behavioral and psychopharmacological interventions.

**DSM-5 Overview/Casebook**
Residents will gain mastery in DSM-5 terminology and diagnosis in this course series, focusing on schizophrenia and other psychotic illnesses, mood disorders, anxiety disorders and substance use disorders. Diagnostic criteria are reviewed and applied in case vignettes discussed in a group format.

**Psychiatry and Culture**
Residents engage in a discussion about the role of culture in psychiatric practice.

**PRITE Review**
Learning to study for the annual PRITE (Psychiatry Resident-In-Training Exam) and psychiatry board exam is an important skill to master as a psychiatrist. Throughout the year, all PGY level residents will engage in coursework specific to the PRITE exam and analysis of individual test-taking strategy and preparation.

**Psychopharmacology**
Residents will learn the fundamentals in a semester-long psychopharmacology course, which includes medication mechanism of action, dosing parameters, side-effect profiles, and pertinent drug interactions.

**Research Methodology**
Residents learn foundational material about how to frame, search and analyze the psychiatric scientific literature to answer clinical health-related questions.

**Residency Lunch Meeting Series (every Wednesday at noon)**
Each Wednesday residents from the PGY-1 (second half of the year), PGY-2, PGY-3, and the PGY-4 Chief Resident meet together with the residency directors and medical education staff for weekly announcements, discussion of administrative issues, and then group coursework. Seminars include the following, alternating weekly from month to month: Psychopharmacology Journal Club, Psychotherapy Journal Club, Medical Student presentation, Resident-only meeting, and PRITE/Boards Review. As a residency program group, residents also discuss a number of topics pertinent to everyday psychiatric practice including the following: spirituality, evidence-based psychiatry, professionalism, communication and handoff, patient safety, quality improvement, sleep deprivation and physician wellness and suicide.
PGY-2 Year:

In addition to shared coursework described above (Medicine, Neurology and Pain/AIMS Review, PRITE/Boards Review, DSM-5 Casebook and Residency Lunch Meeting Series), residents participate in the next set of courses pertinent to their more advanced level of training.

Creedmoor Psychiatric Center Wednesday lecture series:

Psychopathology and Treatment of Major Psychiatric Disorders
This course provides the core foundational material in psychiatric diagnosis. Led by clinicians with specialty experience in each major diagnostic area, this course covers DSM-5 criteria, etiology, pathology, disease course, epidemiology, treatment, and complications associated with major depression disorder, bipolar disorder, anxiety and obsessive-compulsive disorders, trauma-related disorders, dissociative disorders, somatic symptoms disorders, personality disorders, geriatric conditions and substance use disorders.

Specific Psychotherapies
This course instructs residents on the structure of the various psychotherapies, including supportive, supportive and medication, psychodynamic, cognitive behavioral (including dialectical behavior therapy), and brief (motivational enhancement and interpersonal) associated with individual, group and family therapy.

Child Psychiatry
This course covers the core material in diagnosis, treatment, and disease course associated with the major child and adolescent psychiatric conditions.

Psychopharmacology
PGY-2 residents focus on the mechanism of action, dosing, and indications associated with our most commonly prescribed psychotropic medications and apply this to clinical case material.

The Neuroscience of Mental Illness
Residents build on their knowledge of the neuroscience of clinical psychiatry.

Research Methodology
Residents learn about how to use evidenced based psychiatry, best practices, quality improvement projects, and the scientific literature to further the understanding of psychiatric disorders and practice. Residents learn how to write a scientific paper and to present their work in Grand Rounds.

Legal and Ethical Issues in Psychiatry
Residents learn about pertinent legal and ethical issues in psychiatry.

Geriatric Psychiatry
Residents learn about disorders and treatment issues in the elderly population.
Columbia University Irving Medical Center/New York State Psychiatric Institute (all in the second half of the PGY-2 year when residents begin their EYE-6 Evaluation Clinic rotation):

Sexual Behaviors
In this class series, PGY-2 residents learn how to identify and manage issues related to sexuality in their psychiatric practice. Topics range from sexual dysfunction to sexual identity.

Introduction to Psychotherapy
PGY-2 residents build on foundational material in the practice of psychotherapy in this weekly course led by experts in the field from the Columbia University Psychoanalytic Center. Residents discuss issues regarding psychodynamic elements, counter-transferential issues, limit-setting, and adjusting therapy strategy amongst many other topics.

Public Psychiatry
This course is held at the New York State Psychiatric Institute, one of the leading institutions in community/public psychiatry. In these lectures residents will learn detailed information about the nature of public psychiatry, challenges in treating this patient population, and pursuing a career in this area.

PRITE/Board Review: Psychiatry, Neurology and Neuroscience
Exploration of the nature of the annual PRITE exam, its relationship to the psychiatry licensing boards exam, review of foundational test material, and focused time in test question practice are all components in these fun and intensive review classes.

Addiction Psychiatry
Residents build on their knowledge of substance use disorders, assessment, comorbidities, and psychosocial and medication assisted therapies.

Suicide Risk Assessment
This class focuses on suicide risk assessment in the outpatient setting.

ER Psychiatry
This lecture series is led by faculty from the CUIMC Comprehensive Psychiatric Emergency Program (CPEP), with topics including suicide assessment, management of acute psychiatric emergencies, and evaluation of the new-onset psychosis.
PGY-3 Year:

Residents experience an even broader range of coursework led by specialists in the field at their two primary sites during their PGY-3 year: Creedmoor Psychiatric Center (Wednesday lecture series) and Columbia University Irving Medical Center. Residents continue to participate in shared PGY-1, -2, and/or -3 level courses described above in addition to the coursework described below specific to the PGY-3 level.

Creedmoor Psychiatric Center Wednesday lecture series:

*Psychopathology and Treatment of Major Psychiatric Disorders*
Having experienced a range of inpatient psychiatric rotations in the prior two years, residents add to their knowledge base in this course focused on presentations of psychopathology including mood and anxiety disorders, neuropsychiatric, personality disorders, and geriatric conditions in the outpatient setting.

*Psychopharmacology*
These courses are a continuation from the PGY-2 year, during which residents gain in-depth knowledge about the pathophysiology, disease course, and treatment associated with the major DSM-5 psychiatric diagnoses. Residents engage in dynamic group discussions about their ongoing challenging psychopharmacology cases.

*Hypnosis*
Residents learn about the practice of hypnosis and its use in day to day psychiatric practice.

*Career Options/Rewards, Challenges, and the Stress of Practice*
These two courses explore both the exciting opportunities and challenges that await as residents approach their final year of residency training. Examination of career options, the process of fellowship application, and prevention of psychiatrist burn-out are covered in these discussion-based sessions.

*PRITE/Board Review: Psychiatry, Neurology and Neuroscience*
Exploration of the nature of the annual PRITE exam, its relationship to the psychiatry licensing boards exam, review of foundational test material, and focused time in test question practice are all components in these fun and intensive review classes.

*Research Methodology*
Residents learn about how to use evidenced based psychiatry, best practices, quality improvement projects, and the scientific literature to further the understanding of psychiatric disorders and practice. Residents learn how to write a scientific paper and to present their work in Grand Rounds.

*History of Psychiatry*
Residents review key advances in the history of psychiatry up to the present.
Specific Psychotherapies and Psychotherapies Skills Test Review
This course instructs residents on the structure of the various psychotherapies, including supportive, psychodynamic, cognitive behavioral (including dialectical behavior therapy), and brief (motivational enhancement and interpersonal) associated with individual, group and family therapy.

Consultation-Liaison Seminar Series I
Residents learn about issues pertinent to Consultation-Liaison Psychiatry.

Columbia University Irving Medical Center/New York State Psychiatric Institute:

Continuous Case Conference
Residents present their outpatient cases in this weekly psychotherapy case conference and discuss issues regarding psychodynamic elements, counter-transferential issues, limit-setting, and adjusting therapy strategy amongst many other topics.

Human Development
Residents spend time learning about different theoretical perspectives in the field of human development.

Legal Issues in Psychiatry
Residents learn more about pertinent legal issues in the outpatient setting including identification and management.

ER Psychiatry
This lecture series is led by faculty from the CUIMC Comprehensive Psychiatric Emergency Program (CPEP), with topics including suicide assessment, management of acute psychiatric emergencies, and evaluation of the new-onset psychosis.

Eating Disorders
Residents learn key information about the diagnosis and management of eating disorders pertinent to both inpatient and outpatient care.

The Neuroscience of Mental Illness
Residents build on their knowledge of the neuroscience of clinical psychiatry and apply this knowledge to their understanding of mental illness.

Psychopharmacology
Residents gain in-depth knowledge about the psychopharmacological treatment of specific disorders, pathophysiology, and disease course with the major DSM-5 psychiatric diagnoses. Residents engage in dynamic group discussions about their ongoing challenging psychopharmacology cases and learn about current best practices for pharmacological care.

Suicide Risk Assessment
This class focuses on suicide risk assessment in the outpatient setting.
**PGY-4 Year:**

Senior residents continue to participate in the Wednesday lunch course series at Creedmoor Psychiatric Center during their Chief Resident rotation. The designated Chief Resident spends dedicated time with junior residents and Columbia University medical students in supervision of challenging cases on Creedmoor inpatient units. As most of the PGY-4 residents are engaged in specialty elective time at other institutions, structured coursework is located at Columbia University Irving Medical Center.

**Columbia University Irving Medical Center/NYSPI:**

*Continuous Case Conference*
As in the PGY-3 level courses, residents continue to present their outpatient cases in this weekly psychotherapy case conference and discuss issues regarding psychodynamic elements, counter-transferential issues, limit-setting, and adjusting therapy strategy amongst many other topics. Having gained significant knowledge during their earlier residency training years, residents will now begin to engage in more complex discussions about their psychiatric patients. In some cases, residents may be working with select outpatients for the second full year.

*Consultation-Liaison Seminar Series II*
During their CL Psychiatry rotation at CUMC, residents experience a set of C-L specific lectures from experts in the field.
Scholarly Work Opportunities:

Residents are required to submit an entry into the Queens County Psychiatric Society Annual Resident Paper Competition during both the PGY-2 and PGY-3 years. As per the competition requirement, entries are to be no more than 5000 words and can cover a wide range of interests and formats including literature reviews. A few of our residents have achieved special commendations from the society in past years making this a wonderful opportunity for residents to both learn and add elements of achievement to their resumes. Residents also have access to the many primary investigators leading research efforts at both Creedmoor and New York State Psychiatric Institute should they decide to pursue research interests in a more dedicated way. Residents also present a research or clinical topic of interest at the Creedmoor Psychiatric Center Grand Rounds at the end of the PGY-2 and PGY-3 year, yet another opportunity to pursue scholarly interests. Each PGY-1 resident is assigned a member of the Creedmoor faculty to be a mentor to discuss the resident’s interests and issues of professionalism. As training progresses, the program encourages residents to choose other mentors and the Department of Medical Education facilitates such connections. The Resident Mentorship Program is designed to support scholarly work and intellectual pursuits.
Creedmoor Psychiatric Center Institutional Administration

Martha A. Sullivan, DSW, MA, Executive Director, Creedmoor Psychiatric Center

Mark F. Sorensen, MD, Clinical Director, Designated Institutional Official (DIO), Chairperson of the Graduate Medical Education Committee (GMEC), Creedmoor Psychiatric Center; Associate Clinical Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons; Teaching Faculty, Columbia University Center for Psychoanalytic Training and Research

Caterina Grandi, MD*, Chief, Department of Psychiatry, Creedmoor Psychiatric Center; Assistant Clinical Professor of Psychiatry, Columbia University College of Physicians and Surgeons; Assistant Attending in Psychiatry, North Shore University Hospital, Manhasset, N.Y.

Creedmoor Psychiatry Residency Program Faculty

Creedmoor Psychiatric Center

Members of the Department of Medical Education:

Helen L. Schleimer, MD, Associate Clinical Director for Medical Education, Director of Residency Training; Assistant Clinical Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

PremaLatha Rayappa, MD*, Associate Residency Training Director; Assistant Clinical Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

Carisa Kymissis, MD, Associate Residency Training Director for the Columbia-Creedmoor Affiliation; Assistant Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

Louis Linfield, MD, Director of Medical Student Education at Creedmoor Psychiatric Center; Assistant Clinical Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

Nancy Kerner, MD*, Associate Residency Training Director for Scholarly Activities and Research; Instructor in Clinical Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

Stuart Taylor, MD, Director of Continuing Medical Education (CME), Director of the ECT Service; Associate Clinical Professor of Psychiatry at Columbia University Irving Medical Center, Columbia University College of Physicians and Surgeons

Susan Shimon, BA, Program Coordinator and Continuing Medical Education (CME) Coordinator, Department of Medical Education at Creedmoor Psychiatric Center
Roberta Goodman, Voluntary Staff, Former Residency Program and Continuing Medical Education Coordinator, Department of Medical Education and Residency Training

Creedmoor Faculty Members (partial listing):

Ella Brodsky, MD*, Forensic Consultant, Associate Director of ECT Service; MSO President

Alan Diner, MD, Director of Medicine

Ulyana Khaldarov, MD*, Associate Clinical Director for Community Services

Charles Kyriannis, MD, Medical Specialist, ITU

Roger Mathew, MD, Chief Psychiatrist, ITU

Thulasi Ramu Reddy, MD*, Associate Clinical Director for Admissions

Ani Thomas, CSW, Treatment Team Leader, ITU

Aparna Udyawar, MD, Chief Psychiatrist and Resident Supervisor, Queens Village Jamaica Wellness and Recovery Center

Elin Weiss, CSW, Social Work, ITU/Queens Village Jamaica WRC

*Graduates of the Creedmoor Psychiatric Residency Education and Training Program
Post Graduate Training and Employment:

Residents are encouraged to consider continuing into postgraduate sub-specialty fellowships. Creedmoor graduates have consistently achieved top fellowships and job placements in recent years.

Activities of Recent Graduates

Class of 2018:
Dr. Kim Hoang: Attending Psychiatrist, Coney Island Hospital, Brooklyn, NY
Dr. Mohammed Mazharuddin: Attending Psychiatrist, Janian Medical Care, NY
Dr. Gargi Patel: Attending Psychiatrist, University Behavioral Healthcare, Rutgers University, NJ
Dr. Matthew Petrilli: Consultation-Liaison Psychiatry Fellowship, Mt Sinai Health System, NY

Class of 2017:
Dr. Sagar Joshi: Attending Psychiatrist, Woodhull Medical Center, Brooklyn, NY
Dr. Karanjit Parihar: Consultation-Liaison Psychiatry Fellowship, University of Maryland
Dr. Jasmine Sawhne: Initially Public Psychiatry Fellowship, University of Pennsylvania; currently Attending Psychiatrist, Horizon House, Inc., Philadelphia, PA
Dr. Anh Truong: Private practice, Brooklyn, NY

Class of 2016:
Dr. Jason Chorowski: Attending Psychiatrist, South Nassau Communities Hospital
Dr. Omer Haroon: Attending Psychiatrist, Albany Medical Center, Albany, NY
Dr. Elaina Klimchuck: Initially Consultation-Liaison Psychiatry Fellowship, University of Texas-Austin; currently locum tenens
Dr. Binal Maharaja: Attending Psychiatrist, Clarity Clinic, Chicago, Illinois

Class of 2015:
Dr. Ryan Deen: Attending Psychiatrist, Aspire Health Partners’ Behavioral Facility, Orlando, FL
Dr. Swapna Dhillon: Attending Psychiatrist in Psychosomatic Medicine at the Capital Health Hospital, NJ
Dr. Anish John: Addiction Psychiatry Fellowship, Beth Israel Medical Center, NY
Dr. Pooja Tandon: Initially Geriatric Fellowship, Stony Brook University Medical Center, NY; currently Attending Psychiatrist, RWJ Barnabas Health, NJ
**Class of 2014:**

Dr. Jaswinderjit Singh: Attending Psychiatrist at North Shore/Long Island Jewish Medical Center, NY

Dr. Maria Fabunan: Attending Psychiatrist, Creedmoor Psychiatric Center, OMH

Dr. Amanda Gango: Attending Psychiatrist, Washington Heights Community Services, OMH (training site for NYSP/CUMC Psychiatry Residency Program)

Dr. Natasha Thomas: Initially Child-Adolescent Psychiatry Fellowship, University of Southern California, Los Angeles; currently Attending Child and Adolescent Psychiatrist, Kaiser Permanente, California

**Class of 2013:**

Dr. Adnan Ahmed: Initially, Attending Psychiatrist, Mayo Clinic Health System, Mankato, Minnesota; then Forensic Fellow at the University of Minnesota, and currently Attending Psychiatrist at the University of Minnesota

Dr. Reji Attupurath: Initially, Fellowship in Psychosomatic Medicine, Cambridge Health Alliance Program, Cambridge, MA (a Harvard University Teaching Hospital); currently Attending Psychiatrist in Psychosomatic Medicine at Cambridge Health Alliance

Dr. Viktoria Toth: Initially, Fellowship in Geriatric Psychiatry, Long Island Jewish Medical Center, New Hyde Park, NY; currently, Attending Psychiatrist, Long Island Jewish Medical Center

Dr. Julia Shugar: Attending Psychiatrist, Creedmoor Psychiatric Center, OMH

**Class of 2012:**

Dr. Diana Germosen: Attending Psychiatrist, Rockford Center, Newark, Delaware

Dr. Nancy Kerner: Fellowship in Geriatric Psychiatry and T-32 NIH Funded Neuroimaging Research Fellowship at the Late Life Depression Clinic, New York State Psychiatric Institute, OMH; currently Associate Residency Training Director for Scholarly Activities at Creedmoor Psychiatric Center, OMH

Dr. Stephen Remolina: Initially, Fellowship in Child and Adolescent Psychiatry, University of Arizona, Tucson, AZ; currently Attending Psychiatrist, Pantano Behavioral Health Services, Tucson, AZ

**Class of 2011:**

Dr. Jorge Aguilar-Zanatta: Initially, Fellowship in Psychosomatic Medicine; currently Assistant Clinical Professor of Psychiatry, Yale University School of Medicine, Department of Psychiatry, New Haven, CT

Dr. Susmita Dasgupta: Attending Psychiatrist, Alabama Psychiatric Services, Birmingham, Alabama

Dr. Asiya Kabir: Initially, Fellowship in Child and Adolescent Psychiatry, Long Island Jewish Medical Center, New Hyde Park, NY; currently, Attending Psychiatrist, New York City Children’s Center, OMH

Dr. Jean Mugo: relocated to California
Salary, Benefits, Vacation Time

Salary: The Public Employees Federation (PEF), AFL-CIO, negotiates salaries. Please see the accompanying announcement of current salary levels. Residents are encouraged to apply for Direct Deposit of their salary.

<table>
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<th>PGY-Year</th>
<th>Salary Without New York State Medical License</th>
<th>Salary With New York State Medical License</th>
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<tr>
<td>1</td>
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</tr>
<tr>
<td>4</td>
<td>$83,433.00</td>
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</tr>
</tbody>
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These salaries do not include location pay in the amount of $3,020.00 which applies to full-time employees only. Any resident who has a valid medical license in New York State is paid at the licensed salary level.

Vacation: Thirteen days of vacation leave are earned each year. With the addition of five days of personal leave time earned per year and two state “floating holidays” this gives each resident 20 paid days per year available for vacation. Election Day and Lincoln's Birthday are floating holidays that must be used within one year after accrual.

The department strongly encourages use of vacation time in the academic year in which it is accrued. Vacation time earned in a given year of training may not be used in another year, but will be compensated for in pay at the conclusion of training, up to 30 days accumulation.

Vacation time may not be used during certain clinical rotations so residents are encouraged to plan vacation time in advance with the residency program directors.

Personal leave: Five days of personal leave are earned each year.
**Holidays:** There are 12 paid holidays per year (including “floating holidays”). This time off is in addition to the vacation time described above.

**Leave for Professional Examinations:** Four days are allotted per calendar year (not including time allotted for taking the Psychiatry Resident In-Training Examination/PRITE).

**Conference Time:** Residents are encouraged to attend professional meetings. The annual meetings of the American Psychiatric Association are not counted against conference time. Two days of additional conference time are routinely allotted per year with permission from the residency program directors.

**Additional Benefits:**

**Health Insurance:** The comprehensive New York State Empire Plan provides for both inpatient and outpatient medical treatment and also offers partial reimbursement for personal psychotherapy and prescription plans. Dental and Optician Plans are included under PEF benefits.

**Disability Insurance:** Residents accumulate paid sick time during the course of their employment. Additional disability insurance may be purchased.

**Pension Plan:** Residents, considered as temporary employees of the New York State Office of Mental Health (OMH) are not required to participate in the pension plan, but may elect to do so, especially if a career in the New York State system is being considered.

**Professional Liability:** In accordance with Section 17 of the Public Officers Law, New York State indemnifies its physicians for civil liability that arises from acts or omissions while the physician was acting within the scope of his/her public employment of duties. This includes all clinical work and academic activities conducted by Creedmoor residents during assignments at other institutions, but does not include moonlighting activities. For moonlighting, the resident is responsible for arranging appropriate liability coverage.

**Maternity/Paternity Leave and Childcare Leave:** Residents who are pregnant may continue to work as long as they can perform their duties, and do not jeopardize their health or that of their co-workers. Pregnancy is treated the same as personal illness with regard to leave accrual use and other sick leave benefits. Medical evidence may be required.

Either parent of a newborn or adopted child is entitled to a maximum of 7 months leave to care for the child. Parents may elect to use their accumulated leave credits (except sick leave) to receive full pay, or receive leave without pay. The leave period begins from the date of birth or adoption.

**On Call/Duty Hours:** There is no regularly required overnight call in any year of the Creedmoor Program. Residents are assigned to On Call duty throughout their education and training. In New York State, hours on call are set by the standards established by the Bell Commission and the ACGME. The On Call Policy is described at length in the Departmental Manual.
**Moonlighting:** Moonlighting is never required. Permission from the Residency Training Director must be granted prior to moonlighting. Moonlighting hours are counted as Duty Hours and subject to ACGME Duty Hour requirements. Please refer to the Program’s Moonlighting policy.

**Regarding Transportation:** Please note that while New York City has a substantial system of public transportation (subways, trains, and buses), it is strongly advised that you have a car to commute from your home to Creedmoor and the various clinical sites in Queens, Manhattan and elective sites.

**Regarding Leaving After the PGY-3 Year for a Fellowship in Child and Adolescent Psychiatry:** While we encourage our residents to explore their interests in pursuing subspecialty education and training, and while we have had many graduates who have pursued a career in Child and Adolescent Psychiatry, Creedmoor does NOT have a three-year Child track, and we encourage those interested in Child and Adolescent Psychiatry to enter their fellowship after completing the four-year program.

We continue to have required clinical assignments in the PGY-4 year including the following: CL psychiatry, Geriatric Psychiatry, and adult outpatient psychiatry. We do not have one Chief Resident; instead all PGY-4 residents serve three months as Chief Resident. All elective time, up to four part-time months (outpatient assignments and classes continue during electives) is in the PGY-4 year. Elective time is often utilized to explore fellowship possibilities.
Accreditation

Joint Commission
Creedmoor Psychiatric Center is accredited by the Joint Commission (TJC). The most recent survey held in 2017 was successful and resulted in a three-year accreditation.

ACGME
The Creedmoor Psychiatric Center Residency Education and Training Program in Psychiatry is a fully accredited four-year program, accredited by the Accreditation Council for Graduate Medical Education (ACGME) since 1941. The program had its most recent ACGME site visit in 2008. At that time, the program received continuing full accreditation for five years, the most possible. More recently, the program received notice on its continuing full accreditation as part of the ACGME’s transition into the New Accreditation System (NAS). The first site visit in the NAS for the Creedmoor program is scheduled in 2020.

CME Program
The CME program is accredited by the Medical Society of the State of New York (MSSNY). Our CME Program received a six-year full accreditation by MSSNY in 2017.
Application Criteria and Procedure

There are a total of four PGY-1 positions available for the class starting in July 2019. Applications are accepted only through the Electronic Residency Application System (ERAS). The Residency Program participates in the National Residency Matching Program (NRMP) for all of its PGY-1 positions.

Creedmoor Psychiatric Center is an Equal Opportunity/Affirmative Action Employer.

Applicants must be a citizen of the United States, or be a permanent resident of the United States with a Green Card at the time of application. Creedmoor does not sponsor any visas or accept a work permit. Minority applications are encouraged. The deadline for applications for 2019-2023 class is October 31, 2018.

Degree Requirements:

For Applicants with the M.D. or Equivalent Degree:

Applicants must either hold an M.D. or equivalent degree, or must currently be a senior medical student in an approved medical school. This program welcomes IMG applicants. Currently, all of our residents are International Medical Graduates. If you are an International Medical Graduate (IMG), you must be ECFMG certified at time of application. For applicants with substantial time since graduation from medical school, those who can provide evidence of having kept up with current medical knowledge and practice (e.g. having completed a residency in psychiatry outside the United States, and/or having worked in the fields of medicine in general and/or psychiatry in particular) will be looked upon more favorably than those who cannot.

Applicants must have passed Parts 1, 2CK, and 2CS Exams of the USLME. We require applicants to pass each of these exams with no more than 2 attempts. Having already passed Step 3 is not required, but makes for a stronger application.

For Applicants with the D.O. Degree:

Candidates with the D.O degree must have passed the USLME exams to be considered.

Fluency in English:

English competency, both oral and written, is required.

Letters of Recommendation:

You must have at least 3 letters of recommendation, preferably by psychiatrists and from physicians within the United States.
**Past Experience in Psychiatry:**

Having experience in working in the field psychiatry and/or mental health in the United States makes for a stronger application, but is not required. If you have such experience, a recommendation letter regarding your experience is generally a plus.

We are often asked whether Creedmoor Psychiatric Center regularly sponsors any observerships or externships. We do not.

**Scheduling Interviews:**

After the Resident Selection Committee has reviewed the application on ERAS, applicants will be contacted by telephone or via email to schedule a personal interview on one of our Monday morning interview times. On the morning of the interview, candidates will meet with our Program Coordinator, followed by discussion and tour with our Creedmoor Chief Resident, two or three interviews with our faculty, and lunch on-site with some of our current residents.

We regret that owing to the large number of applicants to our program, not all applicants can be called or interviewed.

Any further inquiries should be addressed to:

**Ms. Susan Shimon**  
Program Coordinator  
Residency Education and Training Program in Psychiatry  

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