

UNIVERSITY OF COLORADO DENVER

INTERNAL MEDICINE RESIDENCY PROGRAM

FACT SHEET 2020-2021

OUR MISSION

To provide *innovative* and *individualized* training for the future leaders of internal medicine to excel in their roles as clinicians, researchers and educators

PROGRAM STRUCTURE

Collectively, ~ 175 interns and residents

Categorical Training Program <ul style="list-style-type: none"> ▪ NRMP #1076140Co ▪ 35 Positions per year 	Hospitalist Training Program <ul style="list-style-type: none"> ▪ NRMP #1076140C1 for Hospitalist Leadership program ▪ 4 – 6 Positions per year
Primary Care Training Program <ul style="list-style-type: none"> ▪ NRMP #1076140Mo ▪ 9 Positions per year 	Physician Scientist Training Program (PSTP) <ul style="list-style-type: none"> ▪ NRMP# 1076140C2 ▪ 2 Positions per year
Preliminary Year <ul style="list-style-type: none"> ▪ Medicine – NRMP #1076140Po 	

CLINICAL TRAINING SITES

University of Colorado Hospital Anschutz Medical Campus (UCH)

UCH is a new, state-of-the-art, large interdisciplinary and multispecialty academic health center and research facility that opened in 2004. This quaternary-care hospital provides care to patients throughout the State of Colorado and has a large referral base that includes seven surrounding states. Directly adjacent to the medical campus lies the Colorado Science and Technology Park at Fitzsimons, a biotechnology haven complete with cutting-edge research facilities. The hospital serves the basic health care needs of the local community as well as provides advanced care services to the Rocky Mountain region of the country.

Denver Health Medical Center (DHMC)

Denver Health is a Level-One Trauma Center, providing integrated primary and acute care to 25% of the residents of Denver, Colorado. Denver Health is a nationally renowned model for “safety net” hospital systems with its unique integration of inpatient, urgent care, and outpatient facilities serving all, regardless of their ability to pay. The Denver Health care system consists of a main hospital and multiple outlying community clinics. The patient population is very diverse, with a spectrum of indigent to fully insured patients. Additionally, there is a large Spanish-speaking population with primarily Spanish language clinics available.

Rocky Mountain Regional VA Medical Center (RMR VAMC)

The RMR VAMC is a brand new, state-of-the-art VA facility which opened in August 2018 on the Anschutz Campus alongside the University of Colorado Hospital. RMR VAMC is a premier Level 1A referral hospital within the VA system, serving veterans from Colorado and several surrounding states.

PRACTICE PATTERNS AFTER GRADUATION

55% Fellowship

20% Primary Care

20% Hospitalist

5% Other/Private Practice

TRAINING PROGRAMS

Categorical: the foundation of the residency and of the Department of Medicine emphasizing outstanding, individualized clinical training in diverse care settings with graduated autonomy

Primary Care: one of the preeminent training programs for residents wishing to focus on the total care of the patient with a diversity of experiences and unique training environments

Hospitalist: the very first hospitalist training program in the country, takes a novel approach to preparing residents for a future as a hospitalist or hospital-based specialist

PSTP: a Physician-Scientist training pathway with specialized curriculum geared towards physician scientists where graduates “short-track” to fellowship in two years.

A MATRIX OF OPTIONS: PATHWAYS

In addition to our four training tracks, each resident also selects one of our five career pathways at the start of their second year:

Medical Education Pathway: prepares graduates for success in a career in medical education with specialized training in advanced physical diagnosis, teaching at the bedside, curricular development and more

Health Equity/Health Disparity Pathway: positions graduates to improve health equity through advocacy, recognition and adoption of community resources/partnerships

Research & Innovation Pathway: includes a longitudinal didactic series focusing on key skills such as writing research abstracts and grant applications, also includes fellowship preparation and career mentorship

Medical Leaders Pathway: aims to produce leaders who are at the forefront of national and international efforts to transform health care delivery and medical science by directing programs dedicated to scientific discovery, health equity, access, quality, safety, and improving the value of health care

(***New for 2020***) Global Health Pathway: positions residents to learn the inner working of health care and health care delivery outside of the US, including a robust 2-year curriculum and the opportunity to travel as part of the program

CLINICAL TRAINING FOR 2019-2020

4+4: In July of 2019, we transitioned to a new 4+4 scheduling model. Interns and residents alternate between 4 weeks of continuity clinic and ambulatory-based education or elective time with 4 weeks of an inpatient-based, traditional admitting rotation. This schedule allows for a balanced education of both inpatient and ambulatory experiences. During clinic blocks, residents will also have protected time for research and scholarly activity, dedicated ambulatory curriculum, longitudinal subspecialty experiences, and quality improvement projects.



First Year Rotations

Inpatient-Based: UCH Wards, DH Wards, VA Wards, ICU (Denver Health or University), Cardiology, Acute Care of the Elderly
Ambulatory-Based: Three clinic blocks, one outpatient-based rotation at the VA and two electives

Second Year Rotations:

Inpatient-Based: VA Wards, DW Wards, University ICU, Cardiology, University Wards, VA Swing and Nights
Ambulatory-Based: Three clinic blocks, ED or geriatrics, two electives

Third Year Rotations:

Inpatient-Based: DW Wards, DH ICU, Acute Care for the Elderly, Heme/Onc, University Based Ward Rotation, VA ambulatory rotation
Ambulatory-Based: Three clinic blocks, ED or Geriatrics, two electives

Primary Care Residents do fewer inpatient rotations than Categorical Residents and HTT residents.

AN INNOVATIVE CURRICULUM WITHIN SPECIALIZED DIDACTIC SESSIONS

One half day of protected education time is held every Wednesday morning during ambulatory blocks. This allows for interactive lecture series focusing on core internal medicine content as well as allied subspecialty topics. These educational half-days include an intern-only curriculum focusing on common ambulatory conditions, evidence-based medicine, health disparities, professionalism and wellness during the first year of training.

INTERNATIONAL EXPERIENCES

- Colorado – Zimbabwe International Exchange Program
- Guatemala Global Health Elective
- Himalayan Health in India
- Rwanda
- Uganda
- London School of Hygiene and Tropical Medicine
- Global Health Track at the School of Medicine
- New in 2019:
 - Philippines
 - Nepal

RESEARCH AT COLORADO

- The DOM is perennially ranked in the top 25 of all medicine departments nationally for NIH research funding
- Anschutz Medical Campus researchers, the bulk of whom work for the School of Medicine, attracted \$516.2 million in grants in the 2017-18 fiscal year
- Research mentorship is readily available, and all UC residents participate in some form of research or scholarship during their three years with many presenting at national conferences or publishing their work in leading journals

MENTORSHIP

- Coaching Program: Each resident is assigned a non-evaluative faculty coach on arrival
- Each resident has an assigned Associate Program Director mentor upon matching
- All residents are part of a mentorship team with interns, residents, APDs, faculty that gathers monthly
- Specific faculty mentoring tailored to career goals (i.e. research, educational scholarship, etc.)
- Active mentoring from our very involved Chief Medical Residents

PROGRAM STRENGTHS

- Collegiality: We collaborate at work and enjoy life together outside of the hospital
- Autonomy: Trainees are supported to develop into excellent clinicians in the area of medicine they feel passionate about
- Diversity: Given our diversity of training sites, experiences, and patient populations our graduates are prepared for any and all career choices

OUR GOALS? WE ARE ALL ABOUT YOU!

To make possible the residency training that is most suited to your future plans and your future patients	To mentor you in identifying electives and research projects that promote your learning and career advancement
To provide opportunities to learn about teaching, participate in medical leadership, and foster your commitment to those in need	To equip you with the tools of life-long learning so that your informal training is truly unending

PROGRAM LEADERSHIP

Geoff Connors, MD, FACP: Program Director
Yasmin Sacro, MD: Program Director, Primary Care
Julia Limes, MD: Associate Program Director, Co-Director of the Hospitalist Training Program
Lisa Davis, MD: Associate Program Director
Lindsey Davis, MD: Associate Program Director
Daniel Heppe, MD: Associate Program Director
Mark Kearns, MD: Associate Program Director
Katie Suddarth, MD: Associate Program Director
Emily Gottenborg, MD: Assistant Program Director, Co-Director Hospitalist Training Program
Christine Haynes, MD: Associate Program Director for Primary Care

Amira del Pino-Jones, MD: Director for Housestaff Diversity
Emily Gottenborg, MD and **Manny Diaz**, MD: Co-directors of the Medical Leaders Program

CHIEF MEDICAL RESIDENTS

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~If you have any questions, please contact us! We want to hear from you ~