The School of Medicine is celebrating its Bicentennial in 2010–2011 with a series of lectures and special publications, a documentary film, a community fair, and a symposium exploring the biomedical sciences. An illustrated book about the school, *Medicine at Yale: The First 200 Years*, will be available from Yale University Press in November 2010.

The Bicentennial provides an opportunity to reflect on the achievements of the past two centuries and the ways in which medicine has changed since 1810. Then, life expectancy in New Haven was less than forty years, and medical knowledge was derived from concepts that have long since been discounted. During the School’s evolution, a largely unscientific occupation handed down through apprenticeship has become one of the most education-intensive, rigorously scientific, and highly regulated professions.

As American medicine looks ahead to improving health care, unraveling the mysteries underlying disease, and optimally preparing the doctors of the coming decades, Yale will continue to meet the challenges of a changing medical landscape.
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## Calendar

### ONE HUNDRED AND NINETY-NINTH SESSION

#### FALL 2010

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<th>Day</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 21</td>
<td>M</td>
<td>Clerkship year for third-year students begins, 8 a.m.</td>
</tr>
<tr>
<td>Aug. 2–13</td>
<td>M–F</td>
<td>Registration for third- through fifth-year students, 9 a.m.–4:30 p.m.</td>
</tr>
<tr>
<td>Aug. 19</td>
<td>TH</td>
<td>Matriculation for first-year students, 8–11 a.m.</td>
</tr>
<tr>
<td>Aug. 30</td>
<td>M</td>
<td>First term begins for first- and second-year students</td>
</tr>
<tr>
<td>Aug. 30–Sept. 10</td>
<td>M–F</td>
<td>Registration for second-year students, 9 a.m.–4:30 p.m.</td>
</tr>
<tr>
<td>Nov. 22–28</td>
<td>M–SU</td>
<td>Fall recess for first- and second-year students</td>
</tr>
<tr>
<td>Dec. 4</td>
<td>SA</td>
<td>Winter recess begins for third- and fourth-year students</td>
</tr>
<tr>
<td>Dec. 22</td>
<td>W</td>
<td>Winter recess begins for first- and second-year students</td>
</tr>
</tbody>
</table>

#### SPRING 2011

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan. 3</td>
<td>M</td>
<td>Clerkships begin for third- and fourth-year students Winter recess ends, 8 a.m. Second term begins for first- and second-year students, 8:30 a.m.</td>
</tr>
<tr>
<td>Jan. 3–14</td>
<td>M–F</td>
<td>Registration for all students, 9 a.m.–4:30 p.m.</td>
</tr>
<tr>
<td>Jan. 17</td>
<td>M</td>
<td>Martin Luther King, Jr. Day. No classes</td>
</tr>
<tr>
<td>Mar. 11</td>
<td>F</td>
<td>Spring recess begins, 5 p.m. (No recess for students on clinical rotations)</td>
</tr>
<tr>
<td>Mar. 21</td>
<td>M</td>
<td>Spring recess ends, 8 a.m.</td>
</tr>
<tr>
<td>Apr. 22</td>
<td>F</td>
<td>Good Friday. No classes</td>
</tr>
<tr>
<td>Apr. 29</td>
<td>F</td>
<td>Second term ends for second-year students, 5 p.m.</td>
</tr>
<tr>
<td>May 10</td>
<td>T</td>
<td>Student Research Day. No afternoon classes for first-year students</td>
</tr>
<tr>
<td>May 20</td>
<td>F</td>
<td>Second term ends for fourth-year students, 5 p.m.</td>
</tr>
<tr>
<td>May 23</td>
<td>M</td>
<td>University Commencement</td>
</tr>
<tr>
<td>May 30</td>
<td>M</td>
<td>Memorial Day. No classes for first-year students</td>
</tr>
<tr>
<td>June 3</td>
<td>F</td>
<td>Second term ends for first-year students, 5 p.m.</td>
</tr>
<tr>
<td>June 17</td>
<td>F</td>
<td>Clerkship year for third-year students ends, 5 p.m.</td>
</tr>
</tbody>
</table>
The President and Fellows of Yale University

President
Richard Charles Levin, B.A., B.Litt., Ph.D.

Fellows
Her Excellency the Governor of Connecticut, ex officio
His Honor the Lieutenant Governor of Connecticut, ex officio
George Leonard Baker, Jr., B.A., M.B.A., Palo Alto, California
Edward Perry Bass, B.S., Fort Worth, Texas
Roland Whitney Betts, B.A., J.D., New York, New York
Francisco Gonzalez Cigarroa, B.S., M.D., Austin, Texas (June 2016)
Peter Brendan Dervan, B.S., Ph.D., San Marino, California (June 2014)
Donna Lee Dubinsky, B.A., M.B.A., Portola Valley, California
Mimi Gardner Gates, B.A., M.A., Ph.D., Seattle, Washington (June 2013)
Paul Lewis Joskow, B.A., Ph.D., Locust Valley, New York
William Irwin Miller, B.A., M.B.A., Columbus, Indiana (June 2011)
Indra Nooyi, B.S., M.B.A., M.P.P.M., Greenwich, Connecticut
Barrington Daniels Parker, B.A., LL.B., Stamford, Connecticut
Fareed Zakaria, B.A., Ph.D., New York, New York
The Officers of Yale University

President
Richard Charles Levin, B.A., B.Litt., Ph.D.

Provost
Peter Salovey, A.B., M.A., Ph.D.

Vice President and Secretary
Linda Koch Lorimer, B.A., J.D.

Vice President and General Counsel
Dorothy Kathryn Robinson, B.A., J.D.

Vice President for New Haven and State Affairs and Campus Development
Bruce Donald Alexander, B.A., J.D.

Vice President for Development
Ingeborg Theresia Reichenbach, Staatsexamen

Vice President for Finance and Business Operations
Shauna Ryan King, B.S., M.B.A.

Vice President for West Campus Planning and Program Development
Michael John Donoghue, B.A., Ph.D.

Vice President for Human Resources and Administration
Michael Allan Peel, B.S., M.B.A.
Administration and Faculty

General Administration
As one of the coordinate schools of the University, the general administration of the School of Medicine is conducted in accordance with the bylaws of the Yale Corporation. The affairs of the School are under the direction of the dean and the faculty, subject to the approval of the Corporation.

Administration
Richard C. Levin, B.A., B.Litt., Ph.D., President of the University
Peter Salovey, Ph.D., Provost of the University
Robert J. Alpern, M.D., Dean of the School of Medicine
Paul D. Cleary, Ph.D., Dean of the School of Public Health
Richard Belitsky, M.D., Deputy Dean for Education
David J. Lefell, M.D., Deputy Dean for Clinical Affairs
Carolyn W. Slayman, Ph.D., Deputy Dean for Academic and Scientific Affairs
Cynthia L. Walker, M.B.A., CPA, Deputy Dean for Finance and Administration
Linda C. Mayes, M.D., Special Adviser to the Dean

Nancy R. Angoff, M.D., M.P.H., M.Ed., Associate Dean for Student Affairs
Linda K. Bockenstedt, M.D., Director, Faculty Development and Equity
Carrie P. Capezzone, M.B.A., Assistant Dean for Finance
James P. Comer, M.D., M.P.H., Associate Dean for Student Progress
Lynn Cooley, Ph.D., Director, Combined Program in the Biological and Biomedical Sciences
Robert Dubrow, M.D., Associate Dean for Academic Affairs, School of Public Health
Michael H. Ebert, M.D., Associate Dean for Veterans’ Affairs
Rosemarie L. Fisher, M.D., Associate Dean for Graduate Medical Education
John N. Forrest, M.D., Director, Office of Student Research
Susan H. Gerber, M.B.A., Director of Financial Aid
Janet Hafler, Ed.D., Assistant Dean for Educational Scholarship
Jancy L. Houck, M.A., Associate Vice President for University Development and Director of Medical Development and Alumni Affairs
Mary J. Hu, M.B.A., Director of Institutional Planning and Communications
Anna Maria L. Hummerstone, M.H.A., Director of Human Resource Services
James D. Jamieson, M.D., Ph.D., Director, M.D./Ph.D. Program
Brian P. Leaderer, Ph.D., M.P.H., Deputy Dean of Public Health
Forrester A. Lee, M.D., Associate Dean for Multicultural Affairs
Regina K. Marone, M.L.S., Director, Medical Library
Carolyn M. Mazure, Ph.D., Associate Dean for Faculty Affairs
Laura R. Ment, M.D., Associate Dean for Admissions and Financial Aid
Anne F. Pistell, M.B.A., Associate Dean for Student Affairs, School of Public Health
Sara C. Rockwell, Ph.D., Associate Dean for Scientific Affairs
Michael L. Schwartz, Ph.D., Assistant Dean for Curriculum
Richard A. Silverman, Director, Office of Admissions
Terri L. Tolson, Registrar for Student Affairs
Jacqueline L. Tucker, M.B.A., Director, Operations Management
Ronald J. Vender, M.D., Associate Dean for Clinical Affairs
Mary L. Warner, M.M.Sc., P.A.-C., Associate Dean, Physician Associate Program
Merle Waxman, M.A., Associate Dean and Ombudsperson
George Zdru, B.Arch., Director, Capital Program

Faculty
Faculty listings for the School of Medicine can be found within each department’s write-up in this bulletin. See individual departments, under Departments and Sections. The closing date for departmental faculty lists was April 5, 2010.
History, Mission, and Facilities

HISTORY

The School of Medicine was established following passage of a bill in the Connecticut General Assembly in 1810 granting a charter for “The Medical Institution of Yale College,” to be conducted under the joint supervision of the college and the Connecticut State Medical Society. The institution was formally opened in 1813, and the first degrees were conferred the following year. In 1884, with the approval of the Medical Society, the original charter was amended to place the School definitely in the control of the College as the Medical School of Yale College. The name Yale College was changed to Yale University in 1887, and the name of the Medical School was automatically changed. The present name was adopted in 1918.

Shortly after the establishment of the School, members of its faculty and physicians in the state joined with other citizens in raising funds for a hospital in New Haven to provide, among other services, clinical facilities for the instruction of medical students. The outcome of these efforts was the incorporation of the General Hospital Society of Connecticut in 1826, and the opening of the New Haven Hospital in 1832. The New Haven Dispensary was founded in 1872 and later became a division of the New Haven Hospital. Instruction in clinical medicine has been conducted in the hospital continuously since its establishment.

A merger was effected in 1945 between the New Haven Hospital and Grace Hospital to form the Grace-New Haven Community Hospital. The affiliation agreement between the hospital and University was revised in 1965 and the name of the institution changed to Yale-New Haven Hospital (YNHH). In 1999, a separate affiliation agreement was adopted by the University and the Yale New Haven Health System.

Members of the professional staffs of the VA Connecticut Healthcare System, West Haven, and the Connecticut Mental Health Center, 34 Park Street, hold appointments in Yale University.

MISSION

As a preeminent academic medical center that supports the highest-quality education, research, and patient care, the Yale School of Medicine will (1) educate and inspire scholars and future leaders who will advance the practice of medicine and the biomedical sciences; (2) advance medical knowledge to sustain and improve health and to alleviate suffering caused by illness and disease; and (3) provide outstanding care and service for patients in a compassionate and respectful manner.

FACILITIES

Located southwest of the New Haven Green and Yale’s Old Campus, Yale-New Haven Medical Center includes the School of Medicine, School of Nursing, School of Public Health, Yale-New Haven Hospital (YNHH), Smilow Cancer Hospital, Connecticut Mental Health Center, and the John B. Pierce Laboratory.
The School of Medicine’s Sterling Hall of Medicine, 333 Cedar Street, is the central building. This handsome limestone structure with domed roof includes administrative offices, the 450-seat Mary S. Harkness Auditorium, the Child Study Center, the departments of Cellular and Molecular Physiology, Pharmacology, Molecular Biophysics and Biochemistry, Genetics, Cell Biology, Neurobiology, and History of Medicine.

The Harvey Cushing/John Hay Whitney Medical Library, also located in Sterling Hall of Medicine, houses more than 482,000 volumes and subscribes to more than 9,800 print and electronic journals.

Connected to the south end of Sterling Hall is the Jane Ellen Hope Building, a teaching facility of conference rooms and lecture halls. At Sterling’s north end is the Nathan Smith Building, which spans Cedar Street, joining the School of Medicine and YNHH patient-care facilities, including the Hunter Building, which houses research laboratories for Therapeutic Radiology and Dermatology. The Nathan Smith Building contains offices and laboratories of Yale Cancer Center and the department of Genetics. Entrances to the Hope and Nathan Smith buildings are at 315 Cedar Street and 333 Cedar Street, respectively.

Yale-New Haven Hospital, 20 York Street, is a 944-bed facility with 92 bassinets. The Yale-New Haven Psychiatric Hospital is located nearby at 184 Liberty Street. School of Medicine faculty are attending physicians at YNHH, the School’s primary teaching hospital. All medical and surgical specialties are represented at the hospital, which discharged 54,507 inpatients in 2009. During that period, ambulatory services treated 610,936 outpatients and emergency services had 132,565 visits. The hospital also houses the clinical component of Yale Cancer Center, a joint program of YNHH and the School of Medicine. The fourteen-story Smilow Cancer Hospital at Yale-New Haven opened in the fall of 2009.

The Children’s Hospital provides inpatient and outpatient pediatric services, and also includes a rooftop helipad, high-risk maternity and newborn units, and labor, delivery, and postpartum services. The Yale-New Haven Children’s Hospital is connected to two other hospital pavilions by a three-story atrium.

YNHH is the flagship hospital of the Yale New Haven Health System, an integrated delivery system that includes Bridgeport Hospital, Greenwich Hospital, and their affiliated organizations. Yale New Haven Health, Connecticut’s largest health system, also extends into Rhode Island through its relationship with the Westerly Hospital.

The Laboratory of Epidemiology and Public Health is the School’s other major teaching facility and is home to the medical school’s Department of Epidemiology and Public Health, which also functions as the nationally accredited Yale School of Public Health. The nine-story building at 60 College Street contains classrooms, laboratories, an auditorium, and the office of the dean of Public Health. (Additional administrative offices are housed on the second floor of 135 College Street.) It also is the site of a World Health Organization Collaborating Center, focusing on health promotion policy and research.

Laboratories and offices for the School’s clinical departments are located in contiguous buildings across Cedar Street from Sterling Hall. The Anthony N. Brady Memorial Laboratory and Lauder Hall provide offices and laboratories for the departments of Surgery, Pathology, and Anesthesiology. The Boardman Building houses offices for the departments of Surgery and Internal Medicine. Farnam Memorial Building (FMB) and
the Laboratory of Surgery, Obstetrics and Gynecology (LSOG) provide facilities for the departments of Surgery; Orthopaedics and Rehabilitation; Obstetrics, Gynecology, and Reproductive Sciences; Neurosurgery; and Comparative Medicine.

The YNHH Clinic Building connects Farnam with the Laboratory for Medicine and Pediatrics (LMP). Adjacent to the Clinic Building are Tompkins Memorial Pavilion (TMP) and Fitkin Memorial Pavilion (FMP), facilities shared by the hospital and the School. They contain the departments of Anesthesiology, Neurosurgery, and Orthopaedics and Rehabilitation; the Cardiology section; offices for the Cancer Center; and laboratories and offices for the Department of Pediatrics. On the other side of the Clinic Building are Fitkin Amphitheater, the LMP, and the Lippard Laboratory for Clinical Investigation (LLCI), where research is conducted in the departments of Dermatology, Neurology, Pediatrics, and Therapeutic Radiology.

Laboratories of the Department of Ophthalmology and Visual Science and laboratories and offices of the Department of Psychiatry are located at 300 George Street. Many of the Psychiatry department’s teaching, research, and patient-care activities are conducted at the Connecticut Mental Health Center and the Yale-New Haven Psychiatric Hospital.

The Yale Physicians Building (YPB), a four-story structure on the southwest corner of Howard and Davenport avenues, contains outpatient specialty and consultative services, X-ray, laboratories, and a pharmacy. It also houses academic offices for Orthopaedics and Rehabilitation, Urology, and Otorhinolaryngology. Ophthalmology clinical services and offices moved in 2007 to 40 Temple Street.

The Magnetic Resonance (MR) Center, on the corner of Davenport and Howard avenues, operated by the Department of Diagnostic Radiology, maintains three MR imaging systems for clinical examination. A new Positron Emission Tomography (PET) Center, also operated by the Department of Diagnostic Radiology, maintains a cyclotron radioisotope system for imaging research.

The Boyer Center for Molecular Medicine, at the intersection of Congress Avenue and College Street, houses multidisciplinary programs in Molecular Genetics, Cell Biology, Microbial Pathogenesis, and the interdepartmental Program in Cellular Neuroscience, Neurodegeneration, and Repair.

College Place, a series of buildings at 37–55 College Street, houses a number of administrative offices for the School of Public Health and the Office of Research Administration.

The medical school’s newest research building, at 10 Amistad Street, is home to three interdisciplinary groups: the Interdepartmental Program in Vascular Biology and Therapeutics, the Human and Translational Immunology Program, and the Yale Stem Cell Center.

The Anlyan Center for Medical Research and Education is the medical school’s largest state-of-the-art research and educational facility. Completed in November 2002, this outstanding facility is located on the corner of Cedar Street and Congress Avenue and encompasses a full city block. The building includes six floors of laboratories for disease-based research, core facilities for genomics and magnetic resonance imaging, and state-of-the-art teaching space for anatomy and histology. This facility provides laboratories and offices for the departments of Internal Medicine, Genetics, Immunobiology, and Diagnostic Radiology.
Edward S. Harkness Memorial Hall, 367 Cedar Street, is a student dormitory with the Nicholas P. R. Spinelli student lounge, the Class of 1958 Fitness Center, dining facilities, and the Phyllis Bodel Childcare Center. The School of Medicine offices of admissions, student affairs, financial aid, and international health and student programs are located on the second floor. The offices of education, student research, M.D./Ph.D. Program, and multicultural affairs are located on the third floor.

A number of other spaces in the vicinity of the School are leased rather than owned by Yale University.

The VA Connecticut Healthcare System, West Haven, a major teaching affiliate of the School of Medicine, is the site of the Paralyzed Veterans of America/EPVA Center for Neuroscience and Regeneration Research of Yale University.
Harvey Cushing/John Hay Whitney Medical Library

www.med.yale.edu/library

Regina Kenny Marone, M.L.S., Director
Mary Angelotti, M.L.S., M.S., Document Delivery Manager, Access and Delivery Services
Toby A. Appel, M.L.S., Ph.D., Librarian for Medical History
Janene Batten, M.L.S., Nursing Reference Librarian
Richard Bean, Evening Circulation Supervisor, Access and Delivery Services
Sarah Burge, M.L.S., Preservation Librarian
Daniel Dollar, M.L.S., Head, Collection Development and Management
John Gallagher, M.L.S., Deputy Director of Public Services
Mark Gentry, M.L.S., Clinical Support Librarian and Coordinator, Library Technology Services and Support
Jan Glover, M.L.S., Education Services and Reference Librarian
Charles Greenberg, M.L.S., M.Ed., Coordinator, Curriculum and Research Support, Program Development and Research
Holly Grossetta Nardini, M.L.S., Coordinator of Liaison Activities
Denise Hersey, M.L.S., Coordinator of Liaison Activities
Hongbin Liu, M.L.S., Web Services Librarian
Bob Hughes, Business Manager
Lynn Sette, M.L.S., Reference Librarian
Judy Spak, M.L.S., Curriculum Support Librarian
Lei Wang, M.L.S., Instructional Design Librarian
Susan Wheeler, Curator, Prints and Drawings
Matthew Wilcox, M.L.S., Epidemiology and Public Health Librarian

The Cushing/Whitney Medical Library, a leading research library, serves the Yale-New Haven Medical Center and the health information needs of Yale University. The library is a comprehensive resource for research, patient care, and education materials. The Medical Library is a dynamic and busy place committed to providing students with a supportive place for study and learning, and faculty and staff with seamless access to information resources in the library and at their office workstations.

The library’s Web site is the gateway to an online library of clinical reference tools, databases, evidence-based practice resources, and electronic books and journals in support of programs in medicine, nursing, public health, and the basic sciences. Our rich collection of resources includes electronic and print journals and books, digital resources, images, educational software, and a large unique collection of rare medical books, medical prints, photographs, and memorabilia.

Computers are available in the Information Room and the Computer Resource Laboratory (CRL). In addition, the CRL contains a digital imaging center. The CRL is open 24/7.
All Yale University students have access to electronic resources including electronic books, journals, and databases from any off-campus computer. Wireless access is available throughout the Medical Library. The library also lends laptops to Medical Center students.

Medical librarians provide reference assistance and in-depth consultation, conduct tours, teach classes, acquire and organize the collection, lend materials, and provide a photocopy and document delivery service. Librarians work to create seamless access to full-text electronic resources. Using Yale Links, students can go from database to the full article with just a click of a button. Online tutorials are available 24/7 for quick access to instruction on using library resources. To provide the highest level of service to library users, staff also provides an outreach service to each medical school department. The Library Liaison Program promotes communication between the library and the departments to ensure that the library is meeting the educational and research needs of busy clinicians and researchers. Library liaisons support collaborative activities with students and faculty to foster communication and assist in the research process.

The Medical Library offers a rich program designed to build competency in information management skills: skills that are increasingly important as a foundation for effective research and practice in health sciences. Our goal for this program is to foster lifelong information management skills by providing medical students a solid foundation throughout their four years of medical school.

During their orientation week, first-year students are introduced to the library, the Personal Librarian Program, and their “personal librarian.” Librarians become personal librarians for approximately twenty students and maintain contact with the same students throughout their four years in medical school. A personal librarian is able to recommend resources best suited for individual research needs, provide instruction in new technologies and resources, and guide students to specific resources as their research and learning needs change.

As the second-year students begin research for their thesis project, the library offers seminars on information management, including the use of bibliographic database management programs. At the end of the second year and just before the clinical years begin students attend a “Find it Fast” session. This session is designed to prepare students to find the answer to a clinical question efficiently and effectively.

Third- and fourth-year students participate in a variety of seminars, mostly focusing on evidence-based practice and advanced database searching techniques. Emerging trends and rapidly changing technology in academic medical curricula provide opportunities for faculty and librarians to work together using the Web and other electronic resources as teaching tools to enhance students’ educational experience at Yale.

The Library provides several spaces for group study and meetings. Group study rooms include a lounge area with seating for ten and a wall-mounted LCD monitor, plus two smaller rooms with a table and chairs and a wall-mounted monitor. The Gordon Conference Room is equipped with a table, six chairs, and a twenty-six-inch computer monitor for smaller groups. The Large Conference Room has a table and seating for up to eighteen with a white board and an overhead projector.

The Historical Library contains one of the world’s finest collections of rare medical books, journals, prints, posters, and photographs, as well as current works in the history
of medicine. There are 325 medical incunabula, over 75 manuscript volumes from the
twelfth through sixteenth century, and one of the best study collections of weights and
measures in the world. Its holdings also include Yale medical theses to 1900, catalogues,
yearbooks, photographs, and other publications and ephemera related to the Yale School
of Medicine. In addition, a fine selection of photographs, posters, and other images is
available in the Cushing/Whitney Medical Library Digital Library.

The Cushing Center, which opened in June 2010, houses a unique resource of materi-
als collected by Dr. Harvey Cushing. A neurosurgeon and pioneer of brain surgery, Dr.
Cushing was also an enthusiastic collector. The center is the home of the Harvey Cushing
Brain Tumor Registry, which contains approximately 500 brain specimens, glass-plate
negatives, and accompanying patient files. The space also displays his rich collection of
anatomical and surgical books.

The Ira V. Hiscock Public Health Library develops and sustains services and resources
to support the public health information needs of the School of Public Health and Yale
University. Now a virtual library, it connects to extensive electronic collections in public
health, epidemiology, biostatistics, health policy, environmental health, international
health, chronic disease epidemiology, emerging infectious diseases, and microbiology.
The Public Health Librarian is based in the Yale School of Public Health, and the print
collection is now housed in the Medical Library.

Nursing library services are provided to Yale University School of Nursing (YSN) fac-
ulty, students, and staff through the Medical Library. The Medical Library provides YSN
with a rich collection of both print and electronic materials. The print collection for the
School of Nursing Library is housed in the Medical Library. The Nursing Library Web
site gives the YSN community quick electronic access to important biomedical online
resources, as well as other library electronic resources.

Sterling Memorial Library, Yale’s main library and the largest library on campus,
houses more than four million volumes and serves as the center of the library system.
Twenty-two libraries make up the Yale University Library system, including Kline Sci-
ence Library, the Law Library, and the Social Science Library. EliExpress (Yale Library’s
document delivery service) couriers transport library books daily among these and the
other library units on campus.

ASSOCIATES OF THE YALE MEDICAL LIBRARY

Gerard Burrow, M.D., Chair
Toby A. Appel, Secretary
Telephone: 203-785-4354

The associates were formed in 1948 to assist in augmenting the library’s services and col-
lections. Membership information is available on the associates Web page, www.med.
yale.edu/library/associates.
Degree Programs

Students at the School of Medicine are candidates for the degree of Doctor of Medicine (M.D.). Jointly with the School of Public Health, the School of Medicine administers a program leading to the degrees of Doctor of Medicine (M.D.) and Master of Public Health (M.P.H.). Jointly with the Graduate School, the School of Medicine also administers two other combined degree programs: one leading to the degrees of Doctor of Medicine (M.D.) and Doctor of Philosophy (Ph.D.), and another combined program leading to the degrees of Doctor of Medicine (M.D.) and Master of Health Science (M.H.S.). In addition, special arrangements may be made with the appropriate associate deans to receive the combined Doctor of Medicine (M.D.) and Doctor of Jurisprudence (J.D.) degrees, the combined Doctor of Medicine (M.D.) and Master of Divinity (M.Div.) degrees, and the combined Doctor of Medicine (M.D.) and Master of Business Administration (M.B.A.) degrees. The School of Medicine also offers a program leading to a Physician Associate certificate combined with a Master in Medical Science degree.

DOCTOR OF MEDICINE

The degree of Doctor of Medicine is conferred upon students who have satisfactorily completed the requirements stated below.

1. Pass all of the required basic science courses.
2. Pass all of the required clinical clerkships.
3. Pass the examinations of the United States Medical Licensing Examination (USMLE), Steps I and II.
4. Submit an approved dissertation by mid-March of the year of graduation.
5. Meet all of the requirements of the Progress Committee and Board of Permanent Officers concerning academic standing, moral and ethical character, emotional stability, and professional conduct.

Because of the heavy demands in terms of time and energy required for the study of medicine, the Yale School of Medicine discourages students from assuming extracurricular activities that may prove burdensome. Such extracurricular work and/or professional activity will not justify inadequate academic performance. Any student wishing to work or pursue a professional activity other than medicine that would consume a significant amount of time must have the permission of the associate dean for student affairs.

Admissions

The Yale School of Medicine seeks to provide an education in the scholarly and humane aspects of medicine and to foster the development of leaders who will advance medical practice and knowledge. The Committee on Admissions, in general, seeks to admit students who seem best suited for the educational programs and aims of the School. In particular, the committee looks for intelligent, mature, and highly motivated students who show the greatest promise for becoming leaders and contributors in medicine. The Committee on Admissions also considers very carefully personal qualities necessary for the successful study and practice of medicine. These include maturity, integrity, common
sense, personal stability, dedication to the ideal of service, and the ability to inspire and maintain confidence.

School of Medicine graduates must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. In addition to scholastic accomplishments and potential, applicants must have the physical capacities and personal characteristics to meet the full requirements of the School's curriculum and to graduate as skilled and effective practitioners of medicine. The policy of the School of Medicine regarding nonacademic considerations in the admissions process is available upon request from the Office of Admissions.

The School also attempts to ensure adequate representation of women and all minority groups and a diversity of interests and backgrounds. All applications to the Yale University School of Medicine are given careful consideration without regard to sex, race, age, religion, national origin, sexual orientation, or financial status. For a complete statement of the Yale University policy on nondiscrimination, refer to www.yale.edu/bulletin.

In evaluating candidates, the committee takes into consideration many factors including academic record, MCAT scores, medical experience, research experience, extracurricular activities and accomplishments, leadership potential, recommendations from premedical committees and individual science teachers, and personal interviews.

It is recommended that students enter medical school after four years of study in a college of arts and sciences. Students holding advanced degrees in science or other fields are also considered. International students (other than Canadians) must have completed at least one year of study in an American college prior to application. Students who have been refused admission on three prior occasions are ineligible to apply for admission to the first-year class.

The minimum requirements for admission to the first-year class are:
1. Attendance for three academic years, or the equivalent, at an accredited college of arts and sciences or institute of technology.
2. Satisfactory completion of the following courses including laboratory work:
   - General Biology or Zoology
   - General Chemistry
   - Organic Chemistry
   - General Physics

   (Acceptable courses in these subjects usually extend over one year and are given six to eight term hours credit.) These courses should be completed in a U.S. or Canadian college or university. Advanced courses may be substituted for introductory-level courses in each of these subjects.

The Committee on Admissions has no preference as to a major field for undergraduate study and leaves this decision to students, with the advice that they advance beyond the elementary level in the field of their choice rather than pursue an undirected program. A liberal education is the supporting structure for graduate study and must encompass understanding of the humanities, arts, and society as well as the scientific foundations of technology and civilization. The student of medicine enters a profession closely allied to the natural sciences and must be prepared to cope with chemistry and biology at the graduate level. Students entering college with a strong background in the sciences, as
demonstrated by Advanced Placement courses, are encouraged to substitute advanced science courses for the basic requirements listed above.

**Application Process**

The Yale School of Medicine participates in the “common” application process of the American Medical College Application Service (AMCAS). Applicants must first submit their AMCAS application, on which they indicate that they wish to apply to the Yale School of Medicine. After submitting the AMCAS application, applicants must complete the Yale Supplemental Application, which must be submitted online (see below for details).

Inquiries regarding AMCAS should be addressed to the American Medical College Application Service, 2501 M Street NW, Lobby 26, Washington DC 20037-1300. AMCAS can also be reached by telephone at 202.828.0600 or by e-mail at amcas@aamc.org. Extensive information can also be obtained at the AMCAS Web site: www.aamc.org.

Inquiries to the Yale School of Medicine regarding the degree of Doctor of Medicine should be addressed to the Office of Admissions, Yale University School of Medicine, Edward S. Harkness Memorial Hall D, 367 Cedar Street, New Haven CT 06510. The e-mail address of the admissions office is medical.admissions@yale.edu. Information and a link to the Yale Supplemental Application can also be obtained online at http://medicine.yale.edu/admissions. Inquiries are welcome at any time.

AMCAS applications must be submitted no later than October 15 of the year prior to the fall in which enrollment is sought. Yale Supplemental Applications must be submitted online no later than November 15. Applicants seeking admission under the Early Decision Plan must submit the AMCAS application by August 1 and the Yale Supplemental Application by August 31. The number of students admitted each year for studies leading to the M.D. degree is approximately 100.

A complete application consists of the following components:

1. AMCAS application and all required components of the application (see 2 and 5 below).
2. Complete official transcripts from all colleges attended. Transcripts should be sent from the colleges directly to AMCAS.
3. Yale Supplemental Application submitted online no later than November 15. The Supplemental Application may be found at http://medicine.yale.edu/admissions.
4. An evaluation from the applicant’s Premedical Advisory Committee or individual letters from three of the applicant’s instructors, two of whom should be in science fields. These evaluations must be sent to the Office of Admissions, either directly or via AMCAS Letter Service, VirtualEvals, or Interfolio. Detailed instructions regarding electronic transmission of evaluation letters will be found in the General Information section of the Supplemental Application.
5. Scores from the Medical College Admission Test (MCAT) must be submitted in conjunction with the AMCAS application. For information on the MCAT, applicants should communicate directly with the MCAT Program Office, PO Box 4056, Iowa City IA 52243. Information on the MCAT can also be obtained online at www.aamc.org. Scores of tests taken earlier than three years prior to submitting an application will not be accepted.
6. A fee of $85 or an AMCAS fee waiver must accompany the Yale supplemental application. The fee is not refundable.

During the course of the admissions process, selected applicants will be invited for personal interviews with members of the Committee on Admissions at Yale. Regional interviews can be arranged when necessary.

**Early Decision Program**

The Yale School of Medicine participates in the AMCAS Early Decision Program (EDP). Under EDP, a student may make a single early application to the school of his or her choice and is guaranteed a prompt decision by the school. AMCAS applications for the EDP program must be submitted by August 1. Yale Supplemental Applications must be submitted by August 31. EDP applicants will be notified of the decision of the Committee on Admissions no later than October 1.

**Admission to Advanced Standing (Transfer Admissions)**

Because of a limited number of available positions, the Yale School of Medicine does not routinely consider requests for transfer with advanced standing. The only exception to this policy is that the School will consider applications into the second-year or third-year class from students who are enrolled in LCME-accredited medical schools in the United States or Canada and who have a compelling personal need to be at Yale.

The following three circumstances constitute “compelling personal need” under this policy:

1. The applicant’s spouse, or partner in a same-sex marriage or civil union, holds, or has been accepted for, a position in the Yale-New Haven Medical Center community as a student, a member of the house staff at Yale-New Haven Hospital, a postdoctoral fellow, or a faculty member.

2. There is a serious illness in the immediate family of the applicant, requiring the ill person to be in New Haven for treatment and the applicant to be in New Haven as the primary supportive member of the family during the time of the illness.

3. In collaboration with a faculty member of the Yale School of Medicine, the applicant has completed exceptional biomedical research, which both the applicant and the faculty member wish to continue. Completing medical studies at Yale would enable the applicant to pursue this collaborative research and achieve important and unique educational and scientific objectives that would not be possible at the original medical school.

The distance of the applicant from New Haven will also be taken into consideration. Regardless of other factors, students attending medical school in New York City, Connecticut, or Rhode Island will not normally be eligible to apply for advanced standing.

Transfer into the second-year class is possible only from medical schools with a basic science curriculum compatible with that at Yale. Transfer into the third-year class is contingent upon passing Step I of the United States Medical Licensing Examination (USMLE). An applicant who fails USMLE Step I will not be considered for admission under any circumstances. Transfer into either the second- or third-year class is also
contingent upon successful completion of courses being taken at the current medical school and upon the availability of space at Yale.

Eligible applicants will be evaluated competitively by the School’s Committee on Admissions, with decisions based on academic credentials, supporting material, interviews, and the urgency of the personal need to transfer. Overall qualifications are expected to be comparable to those of Yale students admitted through the regular admissions process.

All accepted applicants must matriculate in the year accepted. Applicants whose eligibility is established by marriage must be married at the time of matriculation, and the applicant’s spouse must be in residence in New Haven and holding a position in the Yale-New Haven Medical Center community. Transfer students must complete all required clinical clerkships (including the fourth-year Primary Care Clerkship and the Integrative Clinical Medicine Clerkship) and the thesis requirement at the Yale University School of Medicine. If a transfer student wishes to spend an extra (fifth) year at Yale, one-half of the tuition for that year will be waived.

Completed transfer applications consist of Yale School of Medicine application forms, letters of recommendation, MCAT scores, college transcripts, a transcript from the current medical school, and a letter from the dean of students (or comparable official) at the current medical school. Inquiries regarding transfer applications should be addressed to the Office of Admissions, Yale University School of Medicine, 367 Cedar Street, New Haven CT 06510 or medical.admissions@yale.edu. Transfer applications, including all supporting credentials, must be submitted by April 1 of the year the student wishes to enter Yale.

**Educational Objective**

The mission of Yale School of Medicine is to educate and inspire scholars and future leaders who will advance the practice of medicine and the biomedical sciences. The educational program is designed to develop physicians who are highly competent and compassionate practitioners of the medical arts, schooled in the current state of knowledge of both medical biology and patient care. It is hoped that Yale-trained physicians will establish a lifelong process of learning the medical, behavioral, and social sciences by independent study. The aim is also to produce physicians who will be among the leaders in their chosen field, whether it be in the basic medical sciences, academic clinical medicine, or medical practice in the community. Belief in the maturity and responsibility of students is emphasized by creating a flexible program through anonymous examinations and the elimination of grades in pre-clinical courses, and by encouraging independent study and research.

**Educational Philosophy: The Yale System**

The Yale System of Medical Education remains unique among medical schools. It has been an important part of life at the Yale School of Medicine since 1931. Although it has undergone minor modifications in the intervening years, its essential spirit has remained intact, and it is a major reason why many students choose to come to Yale for their medical education.
The fundamental element of the system is the concept that Yale medical students are mature individuals, strongly motivated to learn, requiring guidance and stimulation rather than compulsion or competition for relative standing in a group. The corollary of this concept is that students must assume more than usual responsibility for their education. Students should be considered adults in a graduate school and be permitted to enjoy as much freedom as is consistent with the fulfillment of requirements for the degree of Doctor of Medicine. Memorization of facts should be far less important than a well-rounded education in fundamental principles, training in methods of investigation, and the acquisition of the scientific habit of mind.

During the pre-clinical years, the students acquire knowledge and develop clinical skills. Attendance in basic science courses is not taken, lectures are held to a minimum, and much instruction occurs in small-group seminars or conferences. Students evaluate themselves through anonymous examinations. Their performance is assessed by the faculty through participation in seminars, by an anonymous qualifying examination at the end of each course, and by passing of the United States Medical Licensing Examinations. Student attendance is expected in all skill-building sessions, and competency in performing a complete history and physical examination is assessed at the end of the second year, utilizing standardized patients.

In the first two years there are no grades, and there is no class ranking throughout medical school. While grades are not given and rank order not established, evaluation of students is an important part of the educational process. The faculty considers small-group teaching with interchange between faculty and students to be the most effective means of teaching and evaluation. Students should expect direct questioning at seminars and labs as an important adjunct to the evaluation process. The final decision of acceptable performance for a given course or clerkship will remain with the course/clerkship director of each course or clerkship. Freed from the usual anxieties provoked by examinations, students tend to learn for their future rather than for tests. Competition for grades is eliminated and students are eager to help one another. Class spirit is remarkably high year after year. Upon completing a course, all students are strongly encouraged to submit an evaluation so that course directors can make changes based on student feedback, which is taken very seriously.

Finally, the Yale System requires each student to engage in a form of research activity, designed to foster development of a lifelong commitment to learning (see Required Thesis, in the chapter on Degree Programs).

Curriculum Management

Educational Policy Committee (EPC)

The EPC advises the deputy dean for education on policy issues of school-wide importance, including matters related to admissions, graduation requirements, progress of students, joint-degree programs, student research and thesis, and multicultural affairs. The deliberations and recommendations of the EPC are guided by the school’s Educational Mission and School-Wide Objectives as well as the principles embodied in the Yale System of Education. For example, the EPC might examine and advise the deputy dean for education about the impact of curriculum proposals and other medical school issues that:
• affect, modify, or change school policy regarding education
• fundamentally change or potentially disrupt the current curriculum’s structure, schedule, content, or allocation of time
• potentially impact, challenge, or change the School’s fundamental principles and core values as embodied in the Yale System of Education, the School-Wide Educational Objectives, or the Educational Mission Statement

CURRICULUM COMMITTEE (CC)
The CC provides careful and thorough oversight of the curriculum review process. The CC considers recommendations for curriculum change made by its review committees as well as suggestions from students, faculty, and departments. The CC might also form ad hoc working groups to study and promote integration within related areas of learning and across various disciplines and time periods in the curriculum. The CC improves the curriculum by considering new ideas, developing specific proposals, and implementing changes that promote:
• integration and coordination across and throughout the curriculum
• a curriculum designed to achieve the school-wide educational objectives
• assessment of the curriculum based on analysis of reliable outcome measures
• improvement in the quality of education based on new teaching approaches and modern methods of pedagogy
• adherence to existing and new accreditation standards

CURRICULUM REVIEW COMMITTEES
Courses Review Committee
Modules Review Committee
Clerkships Review Committee
Electives Review Committee

The Curriculum Review Committees work collaboratively with department-based course, module, clerkship, and elective directors to review and improve individual courses, modules, clerkships, and electives. This includes gathering information, reviewing and analyzing data, and making recommendations that promote:
• course, module, clerkship, and elective content based on specific learning objectives
• congruence of course, module, clerkship, and elective objectives with overall School-Wide Objectives
• use of the most effective teaching methods to achieve the learning objectives
• effective use of formative, summative, and self-assessment methods
• use of student evaluations and performance outcome data to improve the curriculum
• use of reliable outcome measures to evaluate student achievement of the learning objectives

The Review Committees, through their chairs, will report on their activities to the CC on a regular basis. Recommendations of the Curriculum Review Committees for changes in the content or teaching methodology within a course, module, clerkship, or elective based on these reviews can be directly implemented by the course, module, clerkship, or elective director. However, changes that have broader impact across the curriculum must be brought to the CC for consideration and implementation.
**THESIS COMMITTEE**

The Thesis Committee provides oversight of and recommends policy for all aspects of the medical student thesis program. This includes:

- setting rules and regulations for the thesis requirement
- establishing thesis deadlines
- determining the guidelines and processes for the awarding of thesis honors and graduation prizes, and choosing the recipients
- determining the selection of oral presentations given on Student Research Day

The Thesis Committee regularly reviews the curriculum to assure that there is adequate time available for thesis research, evaluates the participation and effectiveness of faculty mentors, assesses the quality of the student’s research experience, and makes stipend-supported research fellowships available.

A more detailed description of these committees including the membership is available on the Office of Education Web site.

**Pre-Clinical Curriculum**

The first two years of the curriculum at Yale School of Medicine focus on providing students with a foundation in the science and art of medical practice. In the first year, the science of normal human biology is explored in four major areas. The structure of the human body is taught in Human Anatomy and Development, via dissections, and in Diagnostic Imaging. The normal function of the human body is taught in the Molecules to Systems Integrated Curriculum, which includes three departmental courses: Molecular Biochemistry and Biophysics, Cell Biology and Histology, and Medical Physiology. The structure and function of the brain and nervous system are taught in the Neurobiology and Biological Basis of Behavior courses. Teaching of the art of medicine begins with the first day of school, which is devoted to the discussion of the importance of understanding the patient’s and physician’s culture in practicing medicine. The Pre-Clinical Clerkship (PC) introduces students to the principles and skills of medical interviewing and physical examination. PC course sessions and tutorials meet weekly and provide opportunity for students to observe and develop clinical skills. In addition to didactic sessions, this course provides weekly opportunities throughout the first two years for students to see patients and practice skills under the observation of a clinical tutor. During clinical tutorials, groups of four students work closely with a clinician to practice performing clinical histories and physical exams. Further understanding of the patient is achieved in Child and Adolescent Development, which presents a developmental approach to human behavior. The Professional Responsibility course is an opportunity to discuss the attitudes and behaviors of caring and ethical physicians who practice in this complex era of managed care. Integrating the art and science in medical practice requires problem-solving skills, which are developed in the Student Research, Study Design, and Thesis Information course. A major focus of this effort is discussing how to assess the value of information in the medical literature by understanding and applying the basic principles of biostatistics. Throughout the year, students can hear various talks on the History of Medicine, which add depth and texture to the curriculum as well as provide some insight into the time continuum within which the practice of medicine exists.
The first year ends with a focus on the mechanisms of disease: Pathology, Human Genetics, and Immunobiology. The second year emphasizes abnormal human biology. During the fall term the major courses are Epidemiology and Public Health, Medical Microbiology, and Pharmacology. Pathology continues with the Pathology Tutorials, which are spread out over the second year. Beginning in September and continuing throughout the year, students participate in The Modules, a large interdisciplinary course. Content traditionally taught in the separate disciplines of pathology, pathophysiology, pharmacology, clinical examination, laboratory medicine, and diagnostic radiology is organized according to organs or systems. The individual modules are Blood/Hematology, Cardiovascular, Clinical Neurosciences, Clinical Sciences of Psychiatry, Digestive, Endocrine, Musculo-Skeletal, Oncology, Ophthalmology, Renal and Urinary Tract, Reproductive Medicine, Respiratory, and Skin/Dermatology. Teaching the art of medicine continues throughout the year in the Pre-Clinical Clerkship, which emphasizes developing greater skills in history taking and physical examination. Students continue to meet in small groups with their clinical tutors. In the second year, students are given the opportunity to assess their acquired clinical skills in the Standardized Patient Program at the University of Connecticut School of Medicine.

**Pre-Third Year Requirements**

In order to proceed to the third year, a student must satisfy the following requisites:

1. Pass the mandatory qualifying examinations for all first- and second-year courses.
2. Pass the Pre-Clinical Clerkship course.
3. Achieve clinical competence (as ascertained by the clinical tutors).
4. Have a minimum of five commentaries from different required basic science courses in his/her evaluation folder.
5. Comply with all immunization requirements.

In addition, students are strongly encouraged to evaluate all of the basic science required courses.

**The Third Year**

**CLINICAL CLERKSHIPS**

The third year is devoted almost entirely to clinical clerkships. They include:

- Internal Medicine: 8 weeks
- Ambulatory Medicine: 4 weeks
- Surgery: 8 weeks
- Emergency Medicine: 2 weeks
- Anesthesiology: 2 weeks
- Pediatrics: 8 weeks
- Clinical Neuroscience: 4 weeks
- Obstetrics and Gynecology: 6 weeks
- Psychiatry: 6 weeks

Clerkship scheduling will be arranged through the Office of Student Affairs. There is no required order for taking clerkships, and there is no advantage to any particular order.
It is to the student’s advantage to complete as many required clerkships as possible during the third year. In order to change a clerkship schedule after it is assigned, students must (1) fill out a clerkship/elective change form giving reasons for the change and (2) meet with the registrar. Changes are not guaranteed, and no change except in the case of a legitimate emergency will be considered less than four weeks before the start of the scheduled clerkship. Students may receive a lower priority for rescheduling these postponed clerkships in their fourth year than new third-year students. All changes must be approved by the relevant academic adviser and the associate dean for student affairs.

USMLE STEP I

All students are required to sit for Step I of the United States Medical Licensing Examination for the first time by the end of December of the third year in medical school (even if the third year is an extended study year), but students are strongly encouraged to take it before starting clinical clerkships. The United States Medical Licensing Examination (USMLE) Steps I, II Clinical Knowledge, and III are computer-administered at Prometric Testing Centers. This system has given students considerable flexibility over choice of test time and place. Students should consult the USMLE Web site for more information (www.usmle.org).

The Office of Student Affairs holds an informational session in January. An online application must be filled out on the NBME (National Board of Medical Examiners) Web site at www.nbme.org. Within the application, the student must also indicate one of the three-month eligibility periods during which he or she wishes to sit for the exam. Once the application is finished, the student must print out the certification of identification and authorization form and bring it into the Office of Student Affairs, to have the form signed, certified, and mailed directly to the NBME for processing. The application form must be accompanied by one passport photo and payment, by check made out to the NBME in the amount of $505 (unless the fee was paid online by credit card during the application process). Students will be notified via e-mail by the NBME within three to five days confirming the completion of the Step I registration, and then a second e-mail will be sent within a week notifying the student that his or her Electronic Scheduling Permit is available to view and print at the NBME Web site. The student can then call any Prometric test site in the world to schedule a specific test day.

FAILURE OF USMLE STEP I

If a student fails Step I, he or she may reschedule it at any time before May of the third year. Three failures of Step I will require consultation with the Progress Committee, and only in extraordinary circumstances will the student receive permission to take it a fourth time. In the absence of that permission, the student will be dismissed from the School of Medicine. In some cases where a student may be having other academic problems, failing Step I once or twice will be enough to require consultation with the Progress Committee. In some unusual cases, students will not be allowed multiple retakes, for example, if the student is unable to progress satisfactorily in the clerkships or behaves in repeatedly or egregiously unprofessional ways. (See Progress Committee, in the chapter on General Information.) If Step I is failed more than once, the student may be asked to discontinue clinical rotations until he or she takes and passes the exam.
The Fourth Year

The fourth-year curriculum includes a required clerkship and course as follows:

**Primary Care** 4 weeks

**Integrative Clinical Medicine** 3 weeks

The Office of Student Affairs holds a meeting in the spring of the third year to discuss the fourth year. The meeting is focused on the National Residency Matching Program, residency applications, and the Medical Student Performance Evaluation (MSPE), also known as the dean’s letter, but issues of scheduling subinternships, electives, and the thesis requirement are also addressed.

Graduating students are required to submit a thesis plan to the Office of Student Research prior to fall registration of the final year. Students must provide a tentative thesis title as well as identify their thesis adviser.

A required Primary Care Clerkship is generally completed during the fourth year. This four-week clerkship provides students with an opportunity to experience primary care in an outpatient or office setting. Many students also take a number of clinical electives, including a subinternship in some clinical discipline. The residency application process and completion of the thesis are also major activities of the fourth year.

In the spring, students attend a final required course, entitled Integrative Clinical Medicine. This three-week course provides an opportunity for graduating students to come together one last time before leaving for internships and residencies. It offers a review of some of the knowledge and skills needed for internship and beyond, a forum for a comprehensive and critical evaluation of clinical cases, a chance to review some of the historical and economic factors that inform the practice of medicine, and an opportunity to reflect on the social, ethical, psychological, and even spiritual challenges of a life in medicine. Throughout the three weeks there is an emphasis on the interplay among biological, social, and psychological factors in determining the health and illness of our patients as well as ourselves. Also included are sessions on mistakes in medicine, dealing with difficult patients, end-of-life care, doctor-patient communication, race and gender issues in the hospital, and issues in professionalism and medical ethics.

USMLE Step II

Passing USMLE Step I and both parts of Step II is required for graduation from Yale School of Medicine.

The written Step II exam is now called Step II Clinical Knowledge (Step II CK). Step II CK must be taken by December 31 of the final year, and it is strongly recommended that students take it early in the fourth year immediately after completing the clinical clerkships, when the information is fresh.

A clinical skills exam became part of the USMLE in mid-2004, starting with students who graduated in 2005. This new exam, Step II Clinical Skills (Step II CS), is a separate, required component of Step II and must be taken by December 31 of the final year as well; but again, it is to the student’s advantage to take it as soon as possible after completing the clinical clerkships. Utilizing standardized patients, this exam is administered at regionally located centers operating year-round. Test sites include Philadelphia, Atlanta, Los Angeles, Chicago, and Houston.
The cost of Step II CK is $505. Step II CS costs $1,075, but students who may have to travel a distance and stay in a hotel the night before the exam may incur increased expenses. Students who feel that lack of money is preventing them from taking the exam should speak with the associate dean for student affairs as early as possible. Students will go to the University of Connecticut early in their fourth year to complete a standardized patient exercise similar to USMLE Step II CS. They will receive feedback on their performance, and remediation will be offered if necessary. This exercise may be completed prior to Step II CS as a way of ensuring readiness to take the exam.

**Failure of USMLE Step II**

The reason that USMLE Step II must be taken before December 31 of the fourth year is to give anyone who fails the opportunity to retake the exam and get a passing score in time to graduate. In order to be certain that students have taken it or have plans to take it before that date, proof in the form of a score or a ticket will be required before the dean's letter is sent out on November 1. Disregarding this requirement is considered an unprofessional response and may be considered by the Progress Committee in deciding whether a student has satisfactorily completed the requirements to graduate.

The names of any students who subsequently postpone their date to after December 31 will be sent to the dean. Students may have three attempts to pass Step II before being dismissed from the School of Medicine.

**Course Schedules**

**FIRST YEAR**

- Anatomy: Human Anatomy and Development
- Biochemistry: Molecular Biochemistry and Biophysics*
- Biological Basis of Behavior
- Cell Biology: Cell Biology and Histology*
- Child and Adolescent Development
- Genetics: Human Genetics
- History of Medicine
- Immunobiology
- Neurobiology: Structural and Functional Organization of the Human Nervous System
- Physiology: Medical Physiology*
- Pathology: Pathological Basis of Human Disease
- Pre-Clinical Clerkship
- Professional Responsibility
- Student Research, Study Design, and Thesis Information
- Basic Life Support

*Molecules to Systems Integrated Curriculum

**SECOND YEAR**

- Epidemiology and Public Health
- Medical Microbiology
- Pathology: Pathological Basis of Human Disease (Tutorials)
- Pre-Clinical Clerkship
Pharmacology: Mechanisms of Drug Action
Advanced Cardiac Life Support
Universal Precautions

The Modules (including Clinical Examination, Diagnostic Radiology, Laboratory Medicine, Pathology, Pathophysiology, and Pharmacology):
  Blood/Hematology
  Cardiovascular System
  Clinical Neurosciences
  Clinical Science of Psychiatry
  Digestive Diseases
  Endocrine Systems
  Musculo-Skeletal System
  Oncology
  Ophthalmology
  Renal/Urinary Tract (including Male Reproductive System)
  Reproductive Medicine
  Respiratory
  Skin/Dermatology

THIRD YEAR

Internal Medicine
  Inpatient  8 weeks
  Ambulatory 4 weeks
Surgery  8 weeks
Emergency Medicine  2 weeks
Anesthesiology  2 weeks
Pediatrics
  Inpatient  4 weeks
  Ambulatory 4 weeks
Clinical Neuroscience  4 weeks
Obstetrics, Gynecology, and Reproductive Sciences  6 weeks
Psychiatry  6 weeks

FOURTH YEAR

Primary Care  4 weeks
Integrative Clinical Medicine  3 weeks
Electives
Research
Thesis

Required Thesis

Yale is the only medical school with a long tradition requiring a dissertation based on original research. The M.D. thesis, a requirement since 1839, is an essential part of the curriculum, designed to develop critical judgment, habits of self-education, and
application of the scientific method to medicine. The thesis requirement gives students
the opportunity to work closely with faculty who are distinguished scientists, clinicians,
and scholars. The investigation may have its origins in basic science or in clinical, labora-
tory, epidemiology and public health, or medicine and the humanities (medical ethics,
history of medicine, etc.). A hypothesis must be defined, experimental methods devel-
oped, and data gathered to prove or disprove the hypothesis. Students are expected to
use state-of-the-art methods appropriate for research and scholarship in each discipline.
Stipends are provided for summer and all other short-term research periods (four dead-
lines throughout the year). In addition there are many national (Howard Hughes Medi-
cal Institute, National Institutes of Health, Doris Duke Charitable Foundation, Sarnoff
Foundation, American Heart Association, American Society of Nephrology) and Yale-
sponsored one-year research fellowships available. Conduct of the research is continued
during free periods in the third and fourth years and often over summer vacations. A
significant percentage of students (currently 50 percent of Yale medical students) elect
to take an additional year of medical school to pursue their research projects in greater
depth, but this is not a requirement. These students are eligible for a joint M.D.–Master
of Health Science (M.H.S.) if all requirements for the joint degree are fulfilled.

A doctoral dissertation in the biological sciences that has previously been accepted as
a part of the requirements for the Ph.D. degree may be submitted in lieu of a School of
Medicine dissertation at the discretion of the director of the Office of Student Research
and the Thesis Committee. Information about the thesis and research opportunities may
be obtained from the Office of Student Research, 203.785.6633.

JOINT ACADEMIC PROGRAMS

Students from the Yale School of Medicine accepted into another Yale degree program
will be considered to be participating in a “Joint-Degree Program” and will receive the
benefit of sharing tuition between the medical school and the other program’s school so
that each program gives up a half-year of tuition. For example, a student accepted to the
M.D./J.D. Program will pay three and one-half years’ tuition to the School of Medicine
and two and one-half years’ tuition to the Law School, completing seven years of school
in six. This arrangement holds for Yale schools only. A student wishing to create such
an arrangement at a school outside of Yale must receive permission from the associate
dean for student affairs at the School of Medicine and, of course, must have the consent
of the other school.

School of Medicine students enrolled in a joint-degree program or in a program to
obtain a degree at another school must complete three years in the School of Medicine
and pass Steps I and II of the USMLE before beginning in the other program.

M.D./Ph.D. Program

A limited number of highly qualified students will be admitted into the M.D./Ph.D. Pro-
gram each year. Students accepted into this program have an excellent academic record
and a strong motivation toward a career in academic medicine and the biomedical sci-
ences, and will have had previous research experiences of a high caliber.
The goal of the M.D./Ph.D. Program at Yale University School of Medicine is to train physician-scientists and provide them with a broad exposure to human biology and medicine and to an in-depth and rigorous training in one of the scholarly disciplines relevant to medicine. It is expected that these individuals will develop into academic physicians capable of assuming faculty positions in either basic science or clinical departments of schools of medicine, and in these positions will provide leadership in academic medicine and in research related to medicine and human welfare.

The joint-degree program is intended for students who wish to obtain a research degree in an established Ph.D. program. Participating in the M.D./Ph.D. Program are the School of Public Health and the departments of Biomedical Engineering; Cell Biology; Cellular and Molecular Physiology; Chemistry; Experimental Pathology; Genetics; Immunobiology; Microbiology; Molecular Biophysics and Biochemistry; Molecular, Cellular, and Developmental Biology; Neurobiology; Neuroscience; and Pharmacology. Students interested in taking the joint degree in another department may do so, provided they can work out, in advance, a program that is approved by the department concerned, the director of the M.D./Ph.D. Program, the dean of the School of Medicine, and the dean of the Graduate School.

Applicants to the M.D./Ph.D. Program must be U.S. citizens or permanent residents. All applicants selected for admission currently receive support from the program for stipend, tuition, and health fees for a maximum of five years. Funding is provided largely by the Medical Scientist Training Program (MSTP), a grant provided from the National Institute of General Medical Sciences. Continuing in the program is contingent on satisfactory progress in both the School of Medicine and the Graduate School. The average length of time students spend completing the requirements for the M.D./Ph.D. Program is seven and one-half to eight years.

Requirements of the M.D./Ph.D. Program

Students may apply to the M.D./Ph.D. Program at the time of admission to the School of Medicine or no later than mid-November of their second year of study in the M.D. program. Applications for admission are reviewed by a special committee composed of faculty members from both schools.

Candidates for M.D./Ph.D. degrees will normally begin their thesis research after completing the first four and one-half terms of the School of Medicine curriculum. For example, students usually complete a series of clinical rotations at the end of the second year of medical school that will enable them to participate in longitudinal clinical experiences during their Ph.D. years; students following this schedule are expected to affiliate with a graduate program by the beginning of the third year of the program. During the first and second years of medical school, the majority of M.D./Ph.D. students take, for credit, graduate-level courses primarily designed for them. These courses supplement the core medical school curriculum and can be applied toward the course requirements of the student’s chosen Ph.D. program. The summer between the first and second years is spent in lab rotation(s), the purpose of which is to orient students in the selection of a thesis mentor and research area. However, students must request affiliation with a particular department in the Graduate School by the middle of their third year of study in
the joint-degree program. Any exceptions must be approved by the director of the M.D./Ph.D. Program and the dean of the Graduate School.

A student admitted to the combined-degree program must satisfy the Graduate School Honors requirement by the end of the second year of study and must complete all remaining predissertation requirements within four terms of affiliation with the Ph.D. department. These include course requirements, teaching requirements if applicable, a departmental qualifying examination, and the submission of an approved prospectus. At that point, the student is then admitted to candidacy. Students in the M.D./Ph.D. Program must be admitted to candidacy one full year before they expect to be awarded the Ph.D. degree. An average of three to four years is spent completing the Ph.D. requirements.

The remainder of the program encompasses clinical clerkships and electives. This advanced clinical work is best incorporated in the first six months of the student’s third year and the last year of the program, after the doctoral dissertation has been submitted. Only under unusual circumstances will students be allowed to take more than six months of clerkships prior to the beginning of their Ph.D. work. Students are encouraged to take at least the eight-week Internal Medicine Clerkship and one other clerkship prior to beginning their research, which will enable them to participate in outpatient clinical activities during their dissertation work.

The Ph.D. dissertation will be accepted as the thesis requirement for the School of Medicine, providing the Ph.D. degree is received before or at the same time as the M.D. degree. If the M.D. degree is to be awarded before the Ph.D., an approved thesis must be submitted to the Office of Student Research at the School of Medicine by May 1 in order to meet the School of Medicine thesis requirement for graduation. Students will be eligible for the M.D. and Ph.D. degrees, provided the degree requirements for both the School of Medicine and the Graduate School have been fulfilled, usually at the end of seven years. If requirements have not been completed, additional time will be required.

**Joint M.D./Master of Health Science (M.D./M.H.S.)**

Yale School of Medicine has established a joint degree, the M.D./Master of Health Science (M.D./M.H.S.), for students completing a competitively funded full fifth year of research and other requirements. This program was approved by the Yale Corporation in January 2006.

There are two pathways to the M.D./M.H.S. degree for medical students: a clinical research pathway and a laboratory/translational research pathway. The M.D./M.H.S. degree is centered around a fifth-year pull-out supported by a fully funded one-year medical student research fellowship at Yale (currently funded by the Doris Duke Charitable Foundation, the Howard Hughes Medical Institute-Yale Program, Yale NIH T32 grant, NIH-NIDDK fellowships, and Yale Endowment Fellowships).

The independent research project in the fifth year is the centerpiece of the M.D./M.H.S. degree program. In addition the following requirements apply:

1. The project mentor and a three-person thesis committee must be approved by the Office of Student Research and the M.D.-Master of Health Science Advisory Committee.
2. Additional course work is required:
   a. Clinical research pathway – Courses: Principles of Clinical Research; Introduction to Biostatistics; Organization and Leadership; Ethical and Practical Issues in Clinical Investigation (during master’s year)
   b. Laboratory/translational research pathway – Courses: Intensive Pedagogical Experience in Techniques and Strategies for Laboratory Research or Selected Seminars in Clinical and Translational Informatics; Introduction to Biostatistics; Organization and Leadership; Ethical and Practical Issues in Clinical Investigation (during master’s year)

   These courses can be taken prior to the research year or during the research year except the Ethical and Practical Issues in Clinical Investigation course and monthly seminars, which must be taken during the master’s year.

3. Participation in monthly research-in-progress seminars, journal clubs, Leadership in Biomedicine Lecture Series and dinners, and other announced activities throughout the master’s research year is required. Further information is available in the Office of Student Research.

M.D./M.P.H. Program

Students enrolled for the M.D. degree at the School of Medicine may apply to the Yale School of Public Health for admission to a combined program leading to the degrees of Doctor of Medicine and Master of Public Health. This program (Advanced Professional Program) is designed for students with special interest in aspects of medicine dealing with biostatistics, epidemiology of acute or chronic disease, organization and management of health services, or aspects of preventive medicine and public health.

Normally the combined program requires five years of study. One thesis satisfies both degree requirements provided it is approved and carried out under the supervision of a faculty member of the School of Public Health and is in an appropriate subject area.

Applications for the M.P.H. portion of this combined degree program must be submitted through www.sophas.org. The SOPHAS application opens in the fall of each year, and medical students are encouraged to apply during their third year of study. The M.P.H. program is on rolling admissions and the final application deadline is January 15. Medical students may contact the YSPH Director of Admissions, Jacqui Comshaw, or the Director of the AP M.P.H. Program, Dr. Mayur Desai, for more detailed information regarding the curriculum and areas of study.

M.D./M.Div. Program

Students who have been admitted to the Yale School of Medicine and are enrolled for the M.D. degree may apply to the Divinity School for admission to a combined program leading to the award of the degrees of Doctor of Medicine and Master of Divinity. Students who apply to the joint M.D./M.Div. Program are expected to do so at the same time that they apply to the School of Medicine or by the end of their second year at the School of Medicine in order to qualify for the special tuition arrangement. Students enrolled in the program pay three and one-half years’ tuition to the School of Medicine and two and one-half years’ tuition to the Divinity School.
The joint program is tailored to the individual interests and needs of those students seeking professional education and training in a theological understanding of the self, society, and work; in bioethics; in international health and missions; in relating a ministry of healing to hospice or similar patient-care facilities; in a biblical understanding of person; or in academic work in teaching, counseling, and chaplaincy.

Six years are required for the combined M.D./M.Div. Program.

M.D./J.D. Program

The Yale School of Medicine has a formal relationship with the Law School to allow students to seek degrees from both schools. This can be done in six years instead of seven, as would be the case if these disciplines were studied separately. Students pay three and one-half years’ tuition to the School of Medicine and two and one-half years’ tuition to the Law School. Students interested in this program must confer early with the associate deans at both schools to plan curriculum and find out if they qualify for the special tuition arrangement.

Students who apply to the joint M.D./J.D. Program are expected to do so at the same time that they apply to the School of Medicine or by the end of their second year at the School of Medicine in order to qualify for the special tuition arrangement. Students must be found acceptable by both admissions committees. It is suggested that the student state on each application that he or she is applying to both schools in order to pursue the combined degree program.

M.D./M.B.A. Program

The purpose of the joint-degree program in medicine and management is to develop clinician-managers capable of pursuing careers that balance delivery of patient care with sound management in a changing health care environment. The joint-degree program normally requires five years of study and simultaneous award of the degrees of Doctor of Medicine and Master of Business Administration at the conclusion of the five-year period. A joint-degree student pays three and one-half years’ tuition to the School of Medicine and one and one-half years’ tuition to the School of Management, in a pattern determined in advance by the two schools. Students interested in this program must discuss their intentions with the associate deans of student affairs at both schools and with Howard P. Forman, M.D., M.B.A., director of this joint-degree program.

SCHOOL OF PUBLIC HEALTH

The School of Public Health (YSPH) is an accredited school of public health where students may earn the Master of Public Health (M.P.H.) degree. The Doctor of Philosophy (Ph.D.) and Master of Science (M.S.) degrees in public health are awarded through the Graduate School of Arts and Sciences.

The M.P.H. degree program is available either as a two-year program or an eleven-month program for individuals with a doctoral-level degree or to medical school students who have completed their third year in an accredited medical school in the United States. See the YSPH Bulletin for details on each degree program.
THE YALE PHYSICIAN ASSOCIATE PROGRAM

The concept of a physician assistant (or Physician Associate) was first developed in 1965. Today the Physician Associate is a highly valued member of the health care team. Physician Associates are distinguished from other advanced health care practitioners by the extent to which they are given decision-making authority regarding patient care, diagnosis, and treatment. The twenty-seven-month Yale program, established in 1970, is committed to educating students for generalist medical practice. As of December 2009, the Yale Physician Associate Program has graduated 940 Physician Associates who are employed in a variety of settings throughout the nation. Graduates practice in rural as well as urban areas, in emergency rooms, health maintenance organizations, clinics, and solo and private practices. They possess a variety of skills, which enable them to take a medical history; perform a physical examination; diagnose illness and formulate patient treatment plans; counsel patients; perform medical procedures; and assist in surgery.

Mission of the Yale Physician Associate Program

The mission of the Yale School of Medicine Physician Associate Program is to educate individuals to become outstanding clinicians and to foster leaders who will serve their communities and advance the PA profession.

Curriculum Structure and Goals of the Yale Physician Associate Program

The program is divided into a didactic phase of twelve months and a clinical phase of fifteen months. The rigor of the studies often precludes student employment. As a result, students are encouraged to find alternate financial resources during their course of study. Tuition for the 2010–2011 academic year is $29,500; fees and other expenses are similar to those estimated for medical students. A Master of Medical Science degree is awarded upon completion of the program.

THE DIDACTIC PHASE

The first calendar year is devoted to course work in basic and clinical sciences. Courses are listed below.

Anatomy (lecture and laboratory)  Medicine and Surgery
Clinical Genetics  Microbiology
Clinical Practicum  Pathology
Diagnostic Imaging  Pharmacology
History Taking and Physical Examination  Physiology
Introduction to Research  Preventive Medicine
Medical Ethics and Law

THE CLINICAL PHASE

Each student completes fourteen four-week rotations, in a variety of medical specialties, in order to acquire broad experiences in primary, emergency, and surgical care. Two additional four-week blocks during the clinical phase are reserved as research/thesis
months. Ten rotations are mandatory: Internal Medicine I, Internal Medicine II, General Surgery, Primary Care I, Primary Care II, Psychiatry, Pediatrics, Obstetrics and Gynecology, Geriatrics, and Emergency Medicine. The remaining four clerkships are reserved for subspecialty electives.

Although many rotations are in the New Haven area, the experience of the student is expanded by exposure to rotations in other geographic settings. Consequently, students entering the program should expect to spend at least four weeks in areas such as New York, Kentucky, Maine, or Massachusetts. Students should be prepared to provide their own transportation and housing for all rotations away from New Haven. Students may also choose to broaden their experience by selecting rotations abroad. In the past, students have chosen clerkships in Thailand, Uganda, Costa Rica, Tanzania, and England.

In order to graduate from the program, a student must successfully complete all rotations, summative evaluation using standardized patients, and a thesis proposal. The thesis must present a rationale for the topic of study, a comprehensive literature review, and a detailed description of the methodology to be used. A Yale School of Medicine faculty adviser serves as a thesis mentor to each student.

**MANDATORY ROTATIONS**

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<tr>
<th>Emergency Medicine</th>
<th>Obstetrics and Gynecology</th>
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<td>General Surgery</td>
<td>Primary Care I</td>
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<td>Geriatrics</td>
<td>Primary Care II</td>
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<td>Internal Medicine I</td>
<td>Pediatrics</td>
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<td>Internal Medicine II</td>
<td>Psychiatry</td>
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**ELECTIVE ROTATIONS**

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<th>Ambulatory Medicine</th>
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<td>Anesthesiology</td>
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<td>Gastroenterology</td>
<td>Orthopaedics</td>
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<td>Hematology/Oncology</td>
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<td>Hospice</td>
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<td>Industrial Medicine</td>
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<td>Intensive Care</td>
<td>Rheumatology</td>
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<td>International Medicine</td>
<td>Sports Medicine</td>
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<td>Interventional Radiology</td>
<td>Trauma Surgery</td>
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**Admission to the Yale Physician Associate Program**

The admissions process is highly selective and the competition each year is keen. Selection is based on three fundamental criteria: academic history, patient care experience, and interpersonal effectiveness. For additional information regarding admissions, please view our Web site at www.paprogram.yale.edu.
ACADEMIC

Students must have a baccalaureate degree prior to commencing the program. The Admissions Committee closely examines applicant records for evidence that individuals are capable of successfully completing graduate-level science work. An undergraduate science major is not required, but two semesters of biology or zoology with lab, two upper-level biology courses (one of which should be human or animal physiology), one semester of general chemistry with lab, and one semester of organic or biochemistry are prerequisites. A cumulative science grade point average of 3.0 is required. The program considers Graduate Record Exam (GRE) scores and performance in science courses as indicators of academic ability in light of applicants’ past records.

EXPERIENCE

Applicants must have some awareness of the intricacies of medical care delivery as it exists today and demonstrate their commitment to a profession that helps the sick and injured. The majority of the program’s students have had one year of direct patient contact experience in a variety of health care roles such as orderly, nurses’ aide, military corpsman, nurse, surgical technician, or emergency medical technician. Experience need not be in a hospital setting.

INTERPERSONAL

The program values ability to work skillfully, thoughtfully, responsibly, and constructively with people. The Admissions Committee screens applicants to determine their career commitment, interpersonal skills, and willingness to work with the supervision of a physician.

In addition to scholastic potential and interpersonal skills, applicants must have the physical capacities and personal characteristics necessary to meet the full requirements of the program’s curriculum and to graduate as skilled and effective physician assistants. Policy on nonacademic considerations is outlined in our Technical Standards, which are available on the Web site.

The application deadline for the class entering in 2011 is September 1, 2010. Program information, in lieu of a printed catalogue, may be accessed on our Web site, www.paprogram.yale.edu. Applications for admission may be obtained by contacting the Centralized Application Service for Physician Assistants (CASPA) at www.caspaonline.org. The program currently does not require a supplemental application.

P.A./M.P.H. Joint-Degree Program

The P.A./M.P.H. joint-degree program at Yale University School of Medicine affords individuals interested in pursuing clinical and public health training a unique opportunity to complete both degree programs in thirty-nine months. The goal of this program is to expose students to the core competencies requisite for shaping both local and global health systems as physician assistants and policy makers. Students must choose the area of academic concentration for the public health portion of their training from among the following: Epidemiology of Microbial Diseases, Chronic Disease Epidemiology, Social and Behavioral Sciences, and Health Policy.
Applicants must apply for admission and be accepted to both the P.A. Program and the Yale School of Public Health during the admissions cycle. Although the deadline for application to the School of Public Health is January 15, individuals interested in the joint-degree program should apply to the P.A. Program and the School of Public Health as early as possible. For individuals granted an interview with the P.A. Program, the School of Public Health will expedite the review of the application so that applicants can be informed about acceptance to both programs by the end of January.

Tuition and fees are billed to the student by the corresponding school during matriculation. Satisfactory academic progress is required for continued matriculation in both schools. Only students who have begun their studies at Yale are eligible for the joint degree. Transfer students are not accepted to the joint-degree program.
Expenses and Financial Aid

TUITION AND SPECIAL FEES

Tuition for candidates for the M.D. degree (per academic year) $45,600

Yale Health Hospitalization coverage $2,130*

Examination fees for candidates for the M.D. degree,
United States Medical Licensing Examination:

- Step I $505
- Step II—Clinical Knowledge $505
- Step II—Clinical Skills $1,075

*Includes prescription coverage of $420.

Student accounts, billing, and related services are administered through the Office of Student Financial Services, which is located at 246 Church Street. The telephone number is 203.432.2700.

Students must pay four full years of tuition. Students who spend five years in medical school at Yale without receiving a joint degree are billed full tuition for the first four years and a registration fee thereafter. (The student is responsible for his or her own health insurance at a cost of $4,817.80.)

Students who take a leave of absence pay a registration fee for the year(s) on leave. They pay full tuition for the four years they are in residence. If a student decides to begin his or her leave of absence in the middle of any year, he or she pays full tuition for that year and a registration fee for the following year (the student is responsible for his or her own health insurance at a cost of $4,817.80).

The following tuition arrangements for joint-degree programs apply only if the student is enrolled at Yale University for both degrees. It is strongly suggested that students interested in any joint program make an appointment to speak with the director of financial aid and the registrar at each school to discuss the tuition payment schedule.

Students who spend five years in the School of Medicine in order to receive an M.D./M.P.H. joint degree pay four years of full tuition to the School of Medicine. In addition, they pay half of the School of Medicine tuition to the School of Public Health during the year in which they are enrolled in YSPH.

M.D./Ph.D. students pay three and one-half years’ tuition to the School of Medicine and two and one-half years’ tuition to the Graduate School of Arts and Sciences. If a student is in the program after six years, he or she pays a minimal registration fee to the school he or she is attending. (The student is responsible for his or her own health insurance at a cost of $4,817.80.)

Students who apply to one of the joint M.D./J.D., M.D./M.B.A., or M.D./M.Div. programs at Yale are expected to do so at the same time that they apply to the School of Medicine or by the end of their second year at the School of Medicine in order to qualify for the special tuition arrangements. Students in the M.D./J.D. Program pay three and one-half years’ tuition to the School of Medicine and two and one-half years’ tuition to the Law School. Students enrolled in the M.D./M.Div. Program pay three and one-half years’ tuition to the School of Medicine and two and one-half years’ tuition to the
Divinity School. Students in the M.D./M.B.A. Program pay three and one-half years’ tuition to the School of Medicine and one and one-half years’ tuition to the School of Management.

If a student is asked to repeat one or more years of course work because of academic failure in curriculum requirements, he or she pays full tuition for each additional year of study.

Enrollment in courses in other schools at the University may subject the student to additional fees.

First-year students should anticipate a minimum cost of $66,540, including tuition, for necessary expenses in an academic year. Married students and/or students with dependents have a federally established standard maintenance allowance deducted from their income.

First-year students may wish to purchase some of their equipment, such as an ophthalmoscope, which costs approximately $1,000. Each medical student must have special equipment for individual courses.

All students are required to pay a $400 Activity Fee. If a student is enrolled beyond the fourth year, a $200 Activity Fee is charged.

Upperclassmen are reminded that they should anticipate the expenses of travel for interviews related to internship applications and also the cost of typing and binding their theses.

**STUDENT ACCOUNTS AND BILLS**

Student accounts, billing, and related services are administered through the Office of Student Financial Services, which is located at 246 Church Street. The telephone number is 203.432.2700.

**Bills**

Yale University’s official means of communicating monthly financial account statements is through the University’s Internet-based system for electronic billing and payment, Yale University eBill-ePay.

Student account statements are prepared and made available twelve times a year at the beginning of each month. Payment is due in full by 4 p.m. Eastern Standard Time on the first business day of the following month. E-mail notifications that the account statement is available on the University eBill-ePay Web site (www.yale.edu/sis/ebep) are sent to all students at their official Yale e-mail addresses and to all student-designated authorized payers. It is imperative that all students monitor their Yale e-mail accounts on an ongoing basis.

Bills for tuition, room, and board are available to the student during the first week of July, due and payable by August 1 for the fall term; and during the first week of November, due and payable by December 1 for the spring term. The Office of Student Financial Services will impose late fees of $125 per month (up to a total of $375 per term) if any part of the term bill, less Yale-administered loans and scholarships that have been applied for on a timely basis, is not paid when due. Nonpayment of bills and failure to complete and
submit financial aid application packages on a timely basis may result in the student’s involuntary withdrawal from the University.

No degrees will be conferred and no transcripts will be furnished until all bills due the University are paid in full. In addition, transcripts will not be furnished to any student or former student who is in default on the payment of a student loan.

The University may withhold registration and certain University privileges from students who have not paid their term bills or made satisfactory payment arrangements by the day of registration. To avoid delay at registration, students must ensure that payments reach Student Financial Services by the due dates.

**Charge for Rejected Payments**

A processing charge of $25 will be assessed for payments rejected for any reason by the bank on which they were drawn. In addition, the following penalties may apply if a payment is rejected:

1. If the payment was for a term bill, a $125 late fee will be charged for the period the bill was unpaid.
2. If the payment was for a term bill to permit registration, the student’s registration may be revoked.
3. If the payment was given to settle an unpaid balance in order to receive a diploma, the University may refer the account to an attorney for collection.

**Yale University eBill-ePay**

There are a variety of options offered for making payments. Yale University eBill-ePay is the preferred means for payment of bills. It can be found at www.yale.edu/sis/ebep. Electronic payments are easy and convenient—no checks to write, no stamps, no envelopes, no hassle. Payments are immediately posted to the student’s account. There is no charge to use this service. Bank information is password-protected and secure, and there is a printable confirmation receipt. Payments can be made twenty-four hours a day, seven days a week, up to 4 p.m. Eastern Standard Time on the due date to avoid late fees. (The eBill-ePay system will not be available when the system is undergoing upgrade, maintenance, or repair.) Students can authorize up to three authorized payers to make payments electronically from their own computers to the student’s account using Yale's system.

Use of the student’s own bank payment service is not authorized by the University because it has no direct link to the student’s Yale account. Payments made through such services arrive without proper account identification and always require manual processing that results in delayed crediting of the student’s account, late fees, and anxiety. Students should use Yale eBill-ePay to pay online. For those who choose to pay by check, remittance advice with mailing instructions is available on the Web site.

**Yale Payment Plan**

The Yale Payment Plan (YPP) is a payment service that allows students and their families to pay tuition, room, and board in ten equal monthly installments throughout the year based on individual family budget requirements. It is administered by the University’s Office of Student Financial Services. The cost to enroll in the YPP is $100 per contract.
The deadline for enrollment is June 18. For additional information, please contact Student Financial Services at 203.432.2700 and select “Press 3” from the Main Menu. The enrollment form can be found online in the Yale Payment Plan section of the Student Accounts Web site: www.yale.edu/sfas/financial/accounts.html#payment.

FINANCIAL AID

Yale University recognizes the increasing cost of acquiring a medical education and wants students to pursue their medical studies at Yale as free of financial concerns as possible. Therefore, since the amount of funds available to the School is limited, and in order to meet the financial needs of students in a fair and equitable manner, the method for determining the financial aid for individual students is as follows.

In the spring of each year the budgets for students are established. These budgets include all projected expenses, including tuition, books and other educational supplies, microscope rental, and living expenses.

They do not include the cost of purchasing, maintaining, or insuring an automobile.

The Federal Selective Service law was amended in 1982 to provide that no student receive Title IV funds (Federal Direct Loan [Subsidized and Unsubsidized]) unless he or she has executed a Statement of Registration Compliance (SRC) that either confirms that the individual has registered for Selective Service or states the reason why he or she is not required to do so. Because most of the school’s financial aid awards include funds from at least one Title IV program, failure to execute a Statement of Registration Compliance will render students ineligible for that portion of the financial aid award that would normally be provided through these programs. Students for whom this law presents special problems, and who are subject to Selective Service, should consult the financial aid officer.

All student financial assistance is need based.

The amount of the budget considered the student’s responsibility is determined using the Free Application for Federal Student Aid (FAFSA) and the Need Access Application, and includes money from the student’s own resources (assets, salaries, etc.), from the spouse’s income, when applicable, and from a parental contribution. The difference between the amount for which the student is responsible and the basic budget constitutes the financial support for which each student is eligible.

The availability of financial aid is dependent on a student’s status.

(a) Full-Time. An individual who has matriculated at this school and is pursuing a full course of studies as outlined in this catalogue is a full-time student. This includes the required basic science courses in the first and second years and the required clinical clerkship in the third year. In addition, during the fourth year the student works on and completes a required thesis, and completes an adviser-approved schedule of electives. This student is charged full tuition, and financial aid is available if the student completes all the necessary forms and a need for aid has been determined.

(b) Leave of Absence. No financial aid is available to students not attending classes or working toward the requirements of the M.D. degree at Yale or elsewhere. This student is charged a registration fee. If a student is studying at another Yale graduate or professional school, that student is charged tuition by the school he or she is attending.
(c) Extended Study. A student who is not taking a full course load but is attending at least one class at Yale, or elsewhere, and/or is doing research toward the thesis requirement is charged a registration fee and is eligible for financial aid only in the form of a Federal Direct Student Loan. Students on leave of absence or extended study programs may have this option for only one year unless there are exceptional circumstances. Students must be back in school full time at the end of one year.

(d) Satisfactory Academic Progress. In order to be considered eligible for any type of financial assistance, a student must be in good academic standing and making satisfactory progress. At appropriate evaluation intervals, the student must be approved for continued enrollment by the Progress Committee of the School of Medicine. It is this committee’s responsibility to require a student to finish incomplete work and/or complete any required remedial study prior to advancement to the next academic year. If the student fails to finish incomplete work and/or remedial study within one year, the student is not considered in good standing and is ineligible for any type of financial aid. Students are expected to complete the requirements of the M.D. degree within four years. With the approval of the Progress Committee of the School of Medicine or the Office of Student Affairs, a student may remain up to six years.

When a student is no longer in residence and has failed to complete required course work needed to receive the M.D. degree, the student’s enrollment status is in absentia to submit. Failure to complete requirements includes not completing the dissertation, not passing the USMLE Step I or Step II, or not satisfactorily completing a required clerkship. The student is not charged a tuition fee and is not eligible for any financial assistance, University services, and/or loan deferments. Once the student has completed all of the requirements for graduation, his or her name is presented to the Board of Permanent Officers and to the Yale Corporation for the awarding of the M.D. degree.

Consistent with student status, satisfactory academic progress, and available funds, the need for financial aid is met by: (1) loans, made up of monies from various loan sources, and (2) scholarship, when eligibility for financial aid is determined using a parental contribution index. This includes scholarship money supplied directly to the student from non-Yale sources. The maximum scholarship awarded to a married student never exceeds the amount calculated for a single student with no resources. The total scholarship support for all students is, of course, limited by the availability of funds. Should scholarship need exceed the supply of funds, additional loans are made available.

It is the policy of the School of Medicine to abide by the FAFSA and Need Access calculation of the student’s contribution and parental contribution index.

Additional financial support in the form of loans, scholarships, or employment must be made known to the student financial aid officer and may result in a proportionate reduction of School support. If a student does not report changes, his or her financial aid file is subject to review by a Disciplinary Committee and all financial aid may be canceled and the incident reported.

Signed copies of all schedules of both student’s and parents’ income tax and W-2 forms or a statement of earnings for the previous fiscal year are required for all students on aid. Copies of Social Security benefits, unemployment compensation, and retirement benefits of both student and parents are required for all students on aid. All information is verified in accordance with federal regulations. If the parents are divorced, the student
must provide information on the custodial parent. If the parent is remarried, the step-parent’s information is also required.

All information in individual student financial aid folders is strictly confidential and is used only for the purpose of determining and administering the student’s aid.

It is understood that allocations of financial aid are held as binding commitments only insofar as the original data on which these allocations were based are correct.

For 2010–2011 all students who have a calculated loan need and who are U.S. citizens or permanent residents of the United States may borrow up to $40,500 through the Federal Direct (Subsidized and Unsubsidized) Loan program. They may also receive a Yale Medical School loan. The combination of these loans will cover a part of their educational expenses. These loans are normally repaid over a ten-year period beginning six months after borrowers complete their education.

Additional information concerning educational loans available to students of the School of Medicine may be obtained from the Student Financial Aid Office, Room 202, Edward S. Harkness Memorial Hall, 367 Cedar Street, or from our Web site at www.medfinaid.yale.edu.

TUITION REBATE AND REFUND POLICY

On the basis of the federal regulations governing the return of federal student aid (Title IV) funds for withdrawn students, the following rules apply to the rebate and refund of tuition.

1. For purposes of determining the refund of federal student aid funds, any student who withdraws from the School of Medicine for any reason during the first 60 percent of the term will be subject to a pro rata schedule that will be used to determine the amount of Title IV funds a student has earned at the time of withdrawal. A student who withdraws after the 60 percent point has earned 100 percent of the Title IV funds.

In 2010–2011, the last days for refunding federal student aid funds will be October 31, 2010 (Years 1 and 2) and October 20, 2010 (Years 3 and 4) in the fall term, and April 6, 2011 (Year 1), May 18, 2011 (Year 2), May 15, 2011 (Year 3), March 25, 2011 (Year 4) in the spring term.

2. For purposes of determining the refund of institutional aid funds and for students who have not received financial aid:
   a. 100 percent of tuition will be rebated for withdrawals that occur on or before the end of the first 10 percent of the term: September 9, 2010 (Years 1 and 2) and August 26, 2010 (Years 3 and 4) in the fall term, and January 16, 2011 (Year 1), January 23, 2011 (Year 2), January 24, 2011 (Year 3), January 16, 2011 (Year 4) in the spring term.
   b. A rebate of one-half (50 percent) of tuition will be granted for withdrawals that occur after the first 10 percent but on or before the last day of the first quarter of the term: September 24, 2010 (Years 1 and 2) and September 12, 2010 (Years 3 and 4) in the fall term, and February 7, 2011 (Year 1), February 24, 2011 (Year 2), February 27, 2011 (Year 3), February 6, 2011 (Year 4) in the spring term.
   c. A rebate of one-quarter (25 percent) of tuition will be granted for withdrawals that occur after the first quarter of the term but on or before the day of midterm:
October 21, 2010 (Years 1 and 2) and October 9, 2010 (Years 3 and 4) in the fall term, and March 24, 2011 (Year 1), April 28, 2011 (Year 2), April 23, 2011 (Year 3), March 12, 2011 (Year 4) in the spring term.

d. Students who withdraw for any reason after midterm will not receive a rebate of any portion of tuition.

3. The death of a student shall cancel charges for tuition as of the date of death, and the bursar will adjust the tuition on a pro rata basis.

4. If the student has received student loans or other forms of financial aid, funds will be returned in the order prescribed by federal regulations; namely, first to Federal Unsubsidized Direct Loans, if any; then to Federal Subsidized Direct Loans, if any; then to Federal Perkins Loans; Federal Direct Graduate PLUS Loans; then to Health Loans (HPSL, LDS, and Primary Care); next to any other federal, state, private, or institutional scholarships and loans; and, finally, any remaining balance to the student.

5. Recipients of federal and/or institutional loans who withdraw are required to have an exit interview before leaving Yale. Students leaving Yale receive an exit packet from Student Financial Services with instructions on completing this process.

This schedule applies only to the School of Medicine. Contact the School of Public Health and the Physician Associate Program for their schedules and policies.

SCHOLARSHIPS

All scholarships listed below are administered by the Financial Aid Office and are awarded to students based on need and interests. Students who apply for financial aid are automatically applying for these scholarships.

**Robert Campbell Adams and Claire Adams Scholarship Fund**  Established in 1981 by bequest from the Estate of Estelle B. Spinney in memory of her sister and brother-in-law, who graduated from Yale University with the Class of 1899. Preference given to students who plan to practice in rural areas.

**The Ludwig Adler Scholarship Fund**  Established in 1981 by bequest from Hedwig (Mrs. Ludwig) Adler in memory of her husband. To be used for scholarships to needy men and women medical students.

**The Arthur N. Alling Scholarship Fund**  Established in 1986 by bequest from Helen F. Alling in memory of her father, Arthur N. Alling. To be used for scholarships for women medical students.

**The Edward Ames Scholarship Fund**  Established in 1940 by bequest from Edward Ames, M.D. 1874.

**The Waldo Avery Scholarship Fund**  Established in 1979 by Waldo Avery, B.A. 1936.

**The John Kenly Bacon Fund**  Established in 1994 by the Estate of Elsie L. Bacon in memory of her husband, John Kenly Bacon, Yale College Class of 1925, to provide scholarship assistance for worthy students attending the Yale University School of Medicine.
The Muriel Frances Hanley Bagshaw, M.D., Scholarship  Established in 2000 by Malcolm A. Bagshaw, M.D. 1950, in memory of his wife, to assist one or more women students enrolled in the Yale University School of Medicine.

The Judson Bardwell, 1891 M.D., Memorial Scholarship  Established in 1935 from a gift made in 1927 by Harry J. Bardwell, B.A. 1890, in memory of his brother.

The Horace D. Bellis Scholarship Fund  Established in 1966 by bequest from Horace D. Bellis, M.D. 1907. Income to be used for scholarships to worthy students in the School of Medicine.

The Bigwood Memorial Fund  Established in 2002 by bequest from the estate of Gertrude L. Bigwood, M.A. 1932, for student scholarships and/or loans to young students planning careers in the health care profession.

The Eugene M. Blake Fund  Established in 1984 in a bequest by Eugene Maurice Blake, M.D. 1906, M.S. 1929. To provide scholarship funds for the benefit of a medical student.

M. Grant Blakeslee Memorial Scholarship  Established in 1966 by bequest from Catherine Woodruff Blakeslee in memory of her husband, M. Grant Blakeslee, Ph.B. 1912. To be used for scholarships for worthy students in the School of Medicine.

The Sanfurd G. Bluestein, M.D. 1946, Scholarship Fund  Established in 1996 on the occasion of his fiftieth reunion from Yale School of Medicine, to support upstanding medical students with need for financial aid.

The John E. Borowy, M.D. '50, and Ruth Borowy Scholarship  Established in 2006 by the bequest of John E. Borowy, M.D. ’50, to support students in the M.D. program with demonstrated need within the School of Medicine.

The Brace Ogilvie Financial Assistance Fund  Established in 1997 by Donna Brace Ogilvie in honor of her husband John B. Ogilvie, B.S. 1931, M.D. 1934. The Fund supports scholarships for Yale School of Medicine students.

The David L. Brook, Class of 1945S, M.D. 1947, Memorial Scholarship Fund  Established in 1995 through a gift of his family upon his death. Income to be used to assist worthy medical students who are in need of financial assistance.

The Victor Joseph Burner Scholarship in Medicine  Established in 2003 by bequest from Victor Joseph Burner, B.A. 1959, M.D. 1965, to be awarded to any qualified students attending the Yale School of Medicine who meet the requirements for need-based financial aid.

The Edward Thomas Calhoun Scholarship  Established in 1928 by Lida T. Calhoun in memory of her son, Edward Thomas Calhoun, M.D. post-obit 1927. For work in pathology.
The Robert E. Carroll, M.D., ’38 B.A., ’42 M.D. Yale School of Medicine Scholarship
Established in 2007 with a gift from Robert E. Carroll, M.D., ’38 B.A., ’42 M.D., to provide scholarship assistance to a student, with preference given to a graduate of Yale University.

The Ettore Ciampolini Medical Scholarship Fund
Established in 1968 by bequest from the Estate of Helen A. Ciampolini in memory of her late husband, Ettore Ciampolini, M.D., Ph.D. 1923. Income from the fund to be awarded to a deserving male student who is in need of funds to help pay his tuition.

The Class of 1944 Medical Student Scholarship Fund
Established in celebration of the fiftieth reunion of the Class of 1944 Medicine, by all the members of the Class of 1944 Medicine. To provide scholarship assistance for the benefit of medical students.

The Class of 1948 Scholarship
Established by members of the Class of 1948 Medicine, in honor of their fiftieth reunion, to provide financial aid to outstanding medical students who demonstrate need for support.

The Class of 1950 Endowed Scholarship Fund
Established in 2001 by members of the Class of 1950 Medicine to provide scholarships to medical students.

The Class of 1954 Scholarship Fund
Established in 2004 by members of the Class of 1954 Medicine, in honor of their fiftieth reunion, to provide support for medical students.

The Class of 1956 Scholarship
Established in 2006 by members of the Class of 1956 Medicine, in honor of their fiftieth reunion, for students with demonstrated need for financial aid in the M.D. program.

The Class of 1957 Scholarship
Established in 2007 by members of Yale School of Medicine’s Class of 1957, in honor of their fiftieth reunion, to provide financial aid to outstanding medical students who demonstrate need for support.

The Class of 1959 Scholarship Fund
Established by members of the Class of 1959 Medicine to provide financial aid to outstanding medical students who demonstrate need for support.

The Class of 1961 Medical School Scholarship
Established in 2002 by members of the Class of 1961 Medicine to support medical students.

The Class of 1963 Scholarship
Established in 2008 by members of the Class of 1963 Medicine in celebration of their thirty-ninth reunion for one or more outstanding students in the M.D. program with need for financial aid.

The Class of 1967 Memorial Scholarship
Established in 2002 by members of the Class of 1967 Medicine in memory of their classmates.

The Class of 1972 Scholarship Fund
Established in 1998 by members of the Class of 1972 Medicine, in honor of their twenty-fifth reunion, to provide scholarship support for one or more outstanding students in the M.D. program with need for financial aid.
The Thomas J. Coleman III, M.D. and Bebette Gualano Coleman Scholarship  Established in 2000 by Dr. and Mrs. Thomas J. Coleman III in support of scholarships for Yale medical students who plan a practice that will prohibit abortion and euthanasia.

The Julian Czamanski Scholarship  Established in 2002 by bequest from Julian Czamanski of Hamden, Connecticut, to be used for scholarships for students with financial need.

The Lycurgus M. Davey Scholarship Fund  This endowed fellowship was established in 1986 as a gift from Lycurgus M. Davey, M.D. 1943. To be used for financial aid to gifted and needy medical students.

Edwin P. and Eleanor H. Dawson Scholarship Fund  Established in 1971 to be used for the benefit of medical students who are in need of financial assistance.

The Donabedian Family Term Scholarship  Established in 2003 by Richard Kaspar Donabedian, M.D., in honor of his parents, Rose and Martin Donabedian, to support an incoming student of outstanding merit who will personify both scholarly achievement and other qualities of strong character and leadership potential.

Franklin M. Doolittle and Frances C. Doolittle Scholarship Fund  Established in 1959 by a gift from Franklin M. Doolittle, Ph.D. 1915. To be used to provide financial assistance to one or more needy and deserving students enrolled in the School of Medicine.

Thomas H. and Mary Jones Drews Scholarship  Established in 2003 by John A. Drews, M.D. 1967, in honor of his parents, to provide financial assistance each year to medical students.

The John Sinclair Dye Memorial Scholarship  Established in 1971 by a gift from Lucy Wade Dye in memory of her husband, Dr. John Sinclair Dye. Income to be used for scholarships to worthy students in the School of Medicine.

The Alvin E. Friedman-Kien M.D. 1960 Scholarship  Established in 2006 by a gift from Alvin E. Friedman-Kien, M.D. 1960, to support outstanding students in the M.D. and/or M.D./Ph.D. program.

The Carl Gade Fund  Established in 1955 by bequest from Carl Gade, M.D. 1910. To be used to provide assistance for needy and deserving students at the Yale University School of Medicine.

The J. Roswell Gallagher Scholarship  Established by J. Roswell Gallagher, Yale College Class of 1925 and Yale School of Medicine Class of 1930, to provide scholarship assistance to medical students in need.

The John Currier Gallagher Memorial Scholarship  Established in memory of John Currier Gallagher, Yale College Class of 1954 and Yale School of Medicine Class of 1958, by his parents and friends, to provide scholarship assistance to medical students in need.

The Anne G. K. Garland Memorial Scholarship  Established in 1930 by gift from William J. Garland in memory of his wife. Awarded to students in the graduate and professional schools of the university who are chosen because of their ability, character, and promise of future usefulness and the quality of their work.
The Robert H. Gifford, M.D., Medical Scholarship  Established in 2006 by students, colleagues, and friends of Dr. Robert H. Gifford, in honor of his retirement and to provide financial aid for outstanding medical students with the greatest need for support.

The Maurice H. Givens Scholarship Fund  Established in 1974 by bequest from the Estate of Maurice H. Givens, Ph.D. 1909. Income to be used to provide scholarships for financially needy second-year medical students who have excelled in biochemistry.

Gladys Godfried Scholarship  Established in 2006 by bequest of Milton S. Godfried, B.A. 1934, M.D. 1936, in memory of his wife, Gladys Godfried, to provide financial assistance to medical students in good standing entering the third and fourth years.

The James Raymond Goodrich Memorial Scholarship  Scholarships are available in the School of Medicine from the income of a university scholarship fund established in 1923 by gift from Charles Stillman, B.A. 1882, in memory of his uncle, James Raymond Goodrich, B.A. 1853.

The Jack Peter Green, M.D. ’57, Ph.D. ’52, and Arlyne Frank Green Scholarship  Established in 2007 from the estate of Jack Peter Green, ’52 Ph.D., ’57 M.D., and his wife to support promising M.D./Ph.D. students at Yale School of Medicine.

The George D. Gross, M.D., Scholarship  Established in 2004 by the Esther S. Gross Trust to support medical students interested in internal or family medicine.

The Esther S. Gross, M.D., Scholarship  Established in 2004 by the Esther S. Gross Trust to support medical students interested in pursuing a career in pediatrics.

The GTE Corporation Scholarship Fund  Established in 1986 by the GTE Corporation on behalf of GTE operating companies throughout the United States. To be used for scholarships for minority medical students.

The Dixon Hall Scholarship Fund  Established in 1965 by bequest of John Dixon Hall, B.A. 1881, in memory of his father, Dixon Hall, M.D. 1850. Income to be used for assistance to students or in investigation of diseases.

The Winfred Morgan Hartshorn Memorial Scholarship Fund  Established in 1992 by the Estate of Edith H. Woodruff in honor of her father, Winfred Morgan Hartshorn, M.D., Yale College Class of 1898, to provide scholarship assistance to medical students in need.

The Abner Hendee Scholarship Fund  Established in 1949 by bequest from Nellie E. Hendee in memory of her husband, Abner Hendee.

The Muriel Hirshfield Memorial Scholarship  Established in 1964 by a gift of Jack Hirshfield in memory of his wife. Income from this fund to be used to assist needy medical students who are residents of the state of Connecticut, with preference given to students who are residents of the greater New Haven area.

The John A. Hoober Memorial Fund  Established in 1952 by Sarah A. K. Hoober. Income to be used for a scholarship for a student living in the vicinity of York County,
Pennsylvania. Selection of recipient is based on need, character, integrity, personality, and general ability.

**The Howey Fund**  Established in 1945 by bequest from Ennes G. Howey of New Haven. Income awarded to needy and deserving students of good standing and of high moral character.

**The Marion E. Hyde Fund**  Established in 1974 by bequest of Marion E. Hyde in memory of Charles E. Hyde, M.D. 1910. To be used for scholarships for worthy students in the Yale School of Medicine.

**The Harold W. and Helen M. Jockers Fund for Medical School Financial Aid**  Established in 1999 by Mrs. Harold Jockers in support of scholarships for Yale School of Medicine students.

**The Thomas J. Keenan, M.D., Scholarship Fund**  Established in 1997 by the bequest of Thomas J. Keenan, M.D., to provide financial aid to outstanding medical students who demonstrate the need for support.

**The Hans A. and Elizabeth R. Klagsbrunn Scholarship and Loan Fund**  Established by a bequest from Elizabeth Ramsey, M.D. 1932, and her husband, Hans A. Klagsbrunn, LL.B. 1932, for promising medical students who need financial assistance.

**The Marguerite Rush Lerner Award Fund**  Established in memory of his wife by Dr. Aaron B. Lerner, to be directed toward financial aid and awarded to a deserving student in the School of Medicine.

**The Professor Lafayette B. Mendel Scholarship Fund**  Established in 1974 by bequest from the Estate of Maurice H. Givens, Ph.D. 1909, as a memorial to Professor Mendel, whom Mr. Givens continuously admired throughout the years. Income to be used to provide scholarships for financially needy first-year medical students who have demonstrated, at the time of matriculation, a proficiency and interest in biochemistry or physiological chemistry.

**The Howard A. Minners, M.D. 1957, and Family Scholarship**  Established in December 2003 by Howard A. Minners, M.D. 1957, for students attending Yale School of Medicine.

**The Bernadette M. Mosellie Scholarship**  Established in 2009 by Bernadette M. Mosellie, M.P.H. 1986, to provide scholarships for the Master of Public Health tuition for Yale medical students of United States citizenship with outstanding academic achievement and with demonstrated financial need, who are also pursuing a Master of Public Health degree at Yale in the areas of health policy or health management.

**The Professor Ernest Mylon and Hildegard Mylon Scholarship Fund**  Established in 1984 by bequest from Peter Mylon in honor of his parents, Professor Ernest Mylon, M.D., and Hildegard Mylon. To be used for scholarships for medical students.

**The Leona R. M. Normandie Scholarship Fund**  Established in 1994 by the Estate of Leona R. M. Normandie to provide scholarship assistance to medical students.
Julian J. Obermann Fund Established in 1959 by bequest from Julian J. Obermann, honorary M.A. 1935. To be used and applied, from time to time, to defray the costs of tuition and expenses of needy and deserving students in the School of Medicine and those studying in the fields of Oriental, Epigraphic, and Arabic studies in the Graduate and Divinity schools.

The John and Jessie Ogilvie Memorial Scholarship Established in 1968 by gifts from John B. Ogilvie, B.S. 1931, M.D. 1934, in memory of his parents. Awarded to a medical student in the third- or fourth-year class who shows ability, character, and promise for a career in surgery.

The Ogilvie Family (John B., B.S. 1931, M.D. 1934; John G., B.A. 1964; Donald G., B.A. 1965; Jennifer B., B.A. 1991; and Adam, B.A. 1993) Financial Aid Fund Established in 1989 by a gift from John B. Ogilvie. The income is to be used to assist worthy students who are in need of financial help.

The David V. Pecora, M.D. 1941, and Dorothy E. Pecora, R.N., Scholarship Created in 2007 from their gifts, the fund is to support students at the Yale School of Medicine.

The Frank Elmer Phillips, M.D. 1901, Scholarship Fund Established in 1992 by his daughter, Anne P. Whistler, to benefit medical students in need of financial assistance.

The Carrie T. B. Purinton Scholarship Fund Established in 1965 by bequest from Carrie T. B. Purinton. Income to be used for scholarship purposes in the School of Medicine.

The Puzak-Kurtz Student Scholarship Fund Established in 1962 as a gift from Michael Puzak, M.D. 1942, and Mrs. Puzak (Elizabeth Kurtz, M.N. 1941).

The Mila Rainof, M.D., Memorial Scholarship Established in 2010 by family and friends to provide financial aid for an outstanding medical student with demonstrated financial need. It memorializes Mila Rainof, M.D., a member of the class of 2008, who died in a tragic accident weeks before she would have graduated. She had planned on a career in emergency medicine.

The Henry and Dorothea Riedel Scholarship Established in 2003 from the trust of Henry A. Riedel, M.D. 1943, and his wife Dorothea Riedel to benefit promising medical students.

The Nathan E. and Hilda M. Ross Scholarship Established in 2002 from the trust of Nathan E. Ross, B.S. 1925, M.D. 1928, and his wife Hilda M. Ross to benefit needy medical students.

The Dr. Salvatore Sannella and Dr. Lee Sannella Endowment Fellowship Fund Established in 1991 in memory of Salvatore Sannella and in honor of his son, Lee Sannella, M.D. 1940, to benefit needy medical students with preference given to those with an interest in the physiological, psychological, and spiritual qualities of the human being as described by Dr. Lee Sannella in his book The Kundalini Experience.

Scholarships for Disadvantaged Students Established by the university to provide financial assistance to needy medical students.
The Donald H. Sheriden Scholarship Fund  Established in 1986 by bequest from Kathryn Whitelam Wynn in memory of her husband, Donald H. Sheriden. To be used for scholarships to needy medical students.

The Robert S. Sherwin, M.D., Term Scholarship  Established in 2007 by anonymous donors in honor of and appreciation to Dr. Robert S. Sherwin, in order to provide financial aid for a deserving medical student.

The C. V. Starr Scholarship Fund  Established in 1991 by the Starr Foundation to provide financial assistance to medical students.

The Ruth and Milton Steinbach Scholarship Fund  Established in 1991 through a trust by Milton Steinbach, Class of 1924S. This fund to be used to benefit needy men and women in the Epidemiology and Public Health, Medicine, and Physician Associate programs.

The Reuben E. Thalberg Scholarship  Awarded annually by the Reuben E. Thalberg Foundation of Southington, Connecticut, in memory of Dr. Reuben E. Thalberg, to a medical student in need of financial aid while attending the Yale University School of Medicine.

The Charles Henry Thomas Scholarship  Established in 1940 by Georgine H. Thomas in memory of Dr. Charles Henry Thomas, Class of 1873.

The Lois E. and Franklin H. Top, Jr., M.D. 1961, Scholarship  Established in 2001 by Dr. and Mrs. Top to be awarded each year to one or more medical students.

The Joseph Hendley Townsend Scholarship  Established in 1928 by bequest from Emily Allison Townsend in memory of her brother, Joseph Hendley Townsend, B.A. 1885, M.D. 1887, the income to be used for the payment of tuition and other expenses of a New Haven resident.

The Myra Tyler Student Financial Aid Fund  Established in 1998 by the bequest of Myra D. Tyler, Class of 1950, in support of scholarships for Yale School of Medicine students.

The Flora Adler Ullman Memorial Fund  Founded in 1927 by gifts from Joseph C. Johnson and other friends of Flora Adler Ullman, for scholarship aid. The fund was increased in 1935 by bequest from her husband, Isaac M. Ullman.

The Rosa Verdi Scholarship  Established in 1927 by gift from William F. Verdi, M.D. 1894, in memory of his mother.

The Alfred Eastman Walker Scholarship  Established in 1951 by bequest from Frances E. Walker in memory of her brother, Alfred Eastman Walker, B.A. 1864, M.D. 1867. Income awarded to that student in the second year who has made the most satisfactory progress during the first year.

The Bernice L. Walker Scholarship  Established in 2005 from the Estate of Bernice L. Walker to provide support for medical students.
The Arthur Watson Scholarship Fund  Established in 1984 by bequest from Arthur Watson, M.D. 1942. To be used for scholarships for medical students.

Andrew Judson White Scholarship  Established in 1951 by Margaret White (Mrs. Chauncey S.) Truax in memory of her grandfather, Andrew Judson White, M.D. 1846, honorary M.A. 1894. Tuition aid for a student whose character, personality, and record give promise of fine professional service, and who otherwise would be unable to acquire a medical education. May be held by the same student for four years if the student remains eligible.

The William M. Wiepert and Lucille Reed Wiepert Scholarship Fund  Established in 1974 by a gift from an anonymous donor in honor of William M. Wiepert, B.A. 1933, M.D. 1937, and Lucille Reed Wiepert, Ph.D. 1930, M.D. 1937. Income to be used to provide scholarship aid for a financially needy student who has demonstrated scholastic achievement.

The Dr. Amy Hunter Wilson Scholarship  Established in 1990 by Amy Hunter Wilson, M.D. 1930, Dr.P.H. 1934, and Frederick C. Wilson to provide financial assistance to needy medical and public health students.

The Louise Farnam Wilson Memorial Scholarship  Established in 1955, by a gift from Mrs. Samuel Clark Harvey in memory of her sister, Louise Farnam Wilson, Ph.D. 1916. Income to be used to provide scholarship aid for a financially needy student who has demonstrated scholarship. Preference is given to a woman student.

The Donald D. Wright, 1930 B.A., Yale College, 1933 Ph.D. (Chemistry) Scholarship  Established in 1998 by a gift from M. Felix Freshwater, M.D. 1972, in honor of Donald D. Wright, B.A. 1930, Ph.D. 1933 (Chemistry), the chemistry major adviser at Brooklyn College, who took special interest in encouraging the best and brightest Brooklyn College students to apply to Yale School of Medicine. To provide financial aid to medical students with a preference to a graduate of Brooklyn College or a graduate of any college part of the City University of New York system.

The Yale Club of Central New Jersey Scholarship Fund  Armed Forces Scholarships are available upon application.

LOAN FUNDS

All loans listed below are administered by the Financial Aid Office and are awarded to students based on need and interests. Students who apply for financial aid are automatically applying for these loans.

The Alumni Revolving Loan Fund  Established in 1981 by gifts from alumni.

Katharine C. Angell Revolving Loan Fund  Established in 1982 to honor Katharine C. Angell to help recognize her contributions to the School of Medicine.

The Jack R. Aron Loan Fund  Established by gift in 1980 from Jack R. Aron, B.A. 1928. To be used to provide financial aid to minority students in the School of Medicine.
The Harry J. Bardwell Loan Fund  Established 1928 by gift from Harry J. Bardwell, B.S. 1890.

The Leona Baumgartner Student Revolving Loan Fund  Established in 1981 by a gift from Leona Baumgartner Langmuir, M.D. This loan is in honor of a distinguished Yale alumna, Leona Baumgartner, Ph.D. 1931, M.D. 1934.

The William C. and Grace W. Beckert Loan Fund  Established in 1983 by Grace W. Beckert to be used for loans to students in medicine.

The David Challinor Student Loan Fund  Established in 1973 by Mr. and Mrs. David Challinor to be used for student loans at the discretion of the director of student aid.

The Class of 1922 Medical Student Loan Fund  Established in 1922 by gifts from the Class of 1922 Medicine.

The Class of 1923 Medical Student Loan Fund  Established in 1923 by gifts from the Class of 1923 Medicine.

The John Duberg Loan Fund  Established in 1980 by gift from H. P. J. Duberg, B.A. 1930.

Harry Gray Memorial Loan Fund  Established in 1982 by a gift from Jesse G. Rubin, M.D. 1957, and Mrs. Rubin.

C.S.M.S. David A. Grendon Memorial Student Loan Fund  Established in 1972 to provide supplementary loans up to the amount of $500. Financial need of recipient will be established in accordance with the criteria that the School of Medicine uses for determining the financial resources and needs of its students.

Health Professions Student Loan Fund  Established in 1964 by the Department of Health, Education, and Welfare under the Health Professions Educational Assistance Act of 1963 (as amended).

The Howard Heinze Student Educational Fund  Established in 1927. Income to be used to aid deserving students at the Yale School of Medicine.

The Kaiser Loan Fund  Established in 1980 to be used for student loans at the discretion of the director of student aid.

The Wood Kalb Foundation Loan Fund  Established in 1970 as a gift from the Wood Kalb Foundation to provide loans to students of the School of Medicine.

The Bernard L. Kartin Memorial Loan Fund  Established in 1968 by friends and associates of Bernard L. Kartin, M.D., for loans to students in medicine.

The W. K. Kellogg Foundation Loan Fund  Established in 1942 by grants from the foundation, for loans to students in medicine and public health.


The Eli Lilly Loan Fund  Established in 1980. To be used as a revolving loan fund for the benefit of the senior medical students.
Loans for Disadvantaged Students  Established by the university to provide financial assistance to needy medical students.

The George W. Merck Memorial Loan Fund  Established in 1959 by the Merck Company Foundation in memory of George W. Merck, for loans to medical students.

The Harry G. Moss Memorial Loan Fund  Established in 1972 in memory of Dr. Harry G. Moss by his friends and colleagues to provide financial assistance for students in the School of Medicine, thus enabling the needy among them to complete their medical education.

The William Herbert Ordway Memorial Fund  Established in 1956 by Mrs. Ordway in memory of her husband, William Herbert Ordway, M.D. 1912.

The Primary Care Loan  Established in 1993 by the Department of Health and Human Services under the Health Professions Educational Assistance Act of 1993. To be used as a revolving loan fund to assist needy medical students interested in Primary Care Medicine.

The Marion Leonard Robbins Loan Fund  Established in 1962 by bequest from Marion Leonard Robbins, M.S. 1929, M.D. 1931, for loans to students in the School of Medicine.

The Frederick W. Roberts Loan Fund  Established in 1961 in memory of Dr. Frederick W. Roberts, Ph.D. 1920, to provide loans to needy and deserving members of the residency staff of affiliated hospitals.

The School of Medicine Loan Fund  A limited amount of money is available for aiding deserving students during their medical course.

The Anson Frederick Smolowe Memorial Student Loan Fund  Established in 1976 by Mr. and Mrs. Philip Smolowe for medical students in need of financial aid while attending the Yale University School of Medicine, in memory of their son, Anson Frederick Smolowe, B.S. 1964.

The Wayne O. Southwick Resident Loan Fund  Established in 1965 by gifts from an anonymous donor to provide loans to medical students in need of financial aid.

The Phebe Vail Tate Memorial Student Loan Fund  Established in 1956 by Dale S. Tate, B.A. 1897, in memory of his wife, Phebe Vail Tate.

The Reuben E. Thalberg Foundation Loan Fund  Established in 1972 by the Reuben E. Thalberg Foundation for medical students in need of financial aid while attending the Yale University School of Medicine.


The Woods Student Loan Fund  Established in 1955 by a grant from the Woods Charitable Fund, Inc.

The Yale Men in Medicine Fund  Contributions have been made since 1931 for loans to meritorious students.
FELLOWSHIPS

The James Hudson Brown Memorial Fund  Established in 1944 by bequest of Marie B. C. Brown in memory of her husband. The income provides for research fellowships. The latter are open to promising investigators for pursuit of research in the medical sciences, including clinical medicine and public health. Open to holders of the M.D. or Ph.D. degree who have demonstrated their fitness to carry on original research of high order.

The Alexander Brown Coxe Memorial Fellowships in the Biological Sciences  Established in 1927 by a gift from the family of the late Alexander Brown Coxe, B.A. 1887. The income may be awarded annually to an investigator of promise in the comprehensive field of the biological sciences. Preference is given to university graduates who have already obtained the M.D. or Ph.D. degree and who have demonstrated their fitness to carry on original research of a high order.

The William Harvey Cushing Memorial Fellowship  Established in 1928 by Dr. Harvey Cushing, B.A. 1891, as a memorial to his son, William Harvey Cushing, of the Class of 1927, Yale College, for research in surgery.

The Wilbur G. Downs, M.D., International Health Travel Fellowship  The Committee on International Health was established by the Department of Epidemiology and Public Health in 1965. In 1984, this fellowship was named in honor of Wilbur G. Downs, M.D., M.P.H., an eminent medical scholar, renowned for his work in international health. The Committee on International Health selects students studying diseases such as malaria; the fund provides travel fare and a small stipend to students, who are asked to report on their research and experiences upon their return.

The Mitchel Edson, M.D. 1956, International Clinical Rotation Fund  Established in honor of his fiftieth reunion to support the travel for an international clinical rotation of a highly motivated medical student in an underdeveloped country or a country where there is a pressing health care need.

The John F. and Carolyn B. Enders Research Fund  Established in 1986 by bequest from the estate of John F. Enders, Yale Class of 1919, Ph.D. and Nobel Laureate in Medicine, to support fellowships for medical research.

The William U. Gardner Memorial Research Fund  Established by Katherine H. Gardner in memory of her husband William U. Gardner, Ph.D., Ebenezer K. Hunt Professor of Anatomy and Professor Emeritus of Anatomy at Yale, to support research projects related to endocrinological aspects of cancer.

The Richard K. Gershon, M.D., Student Research Fellowship  Established in 1986 by the faculty and friends in honor of Richard K. Gershon, M.D. 1959, to support a medical student for a fifth year of medical school in order to be able to carry out research in immunology or a related discipline.

The Samuel Jordan Graham Fellowship  Established in 1961 in memory of Judge and Mrs. Samuel Jordan Graham by the Estate of E. Norma P. (Mrs. S. J.) Graham. To be
used to assist students who are pursuing postgraduate study or research in the School of Medicine, preferably those specializing in surgery.

The James G. Hirsch, M.D., Endowed Medical Student Research Fellowship Established in 1988 by the Josiah Macy, Jr. Foundation as a tribute to its late president and member of the Yale Corporation, James G. Hirsch, Class of 1943S, M.D., to support medical students extending their course of study to pursue research projects from four to five years.

The Richard Alan Hirshfield Memorial Fellowship Established in 1961 by Mr. and Mrs. Jack Hirshfield in memory of their son. To be awarded to a student doing research in ulcerative colitis or related diseases or other research projects.

The G.-D. Hsiung, Ph.D., Student Research Fellowship Fund Established in 1989 by colleagues and friends to honor Gueh-Djen Edith Hsiung, Ph.D., Professor Emeritus of Laboratory Medicine, and to provide medical students who are promising scientists with research fellowships in clinical virology and related projects in viral pathogenesis.

The Charles Linnaeus Ives Fellowship Founded in 1924 by bequest from the widow of Charles Linnaeus Ives, B.A. 1852, for research in pathology.

The Eric P. Kindwall, M.D. 1960, International Clinical Rotation Fund Established to support the travel for an international clinical rotation of a highly motivated medical student in an underdeveloped country or a country where there is a pressing health care need.

The Francis G. Kingsley Memorial Fellowships Established in 1986 by friends and family to honor Francis G. Kingsley, a special friend to the Yale School of Medicine. To be awarded for one to three years to young investigators at Yale whose research shows great promise.

The Paul H. Lavietes, M.D., Summer Research Fellowship Fund Established in 1991 in honor of Paul H. Lavietes, B.S. 1927, M.D. 1930, former Clinical Professor of Medicine and Public Health at the Yale School of Medicine and Medical Director of Community Health Care Plan, by his friends and family. To provide significant support for summer research fellowships for promising medical students.

The Vernon W. Lippard, M.D., Student Summer Research Fellowship in Pediatrics Established in 1985 by the William T. Grant Foundation to honor former dean of the Yale School of Medicine, Vernon William Lippard, M.D., Sc.D., Dean Emeritus and Professor Emeritus of Pediatrics. To be awarded annually to students working in the area of children's behavior within the Department of Pediatrics or the Child Study Center.

Howard A. Pearson Fellowship in Pediatric Hematology/Oncology Established in 2000 to support fellows in pediatrics.

George G. Posener Endowed Fellowship for Education and Training and Stem Cell Research in Trauma and Surgical Critical Care Established in 2002 by George G. Posener as a memorial to his beloved wife, parents, four sisters, brother (Morris, Yale
Class of 1938), and his two precious sons, and to honor Dr. Reuven Rabinovici of the Trauma and Surgical Critical Care Section of the Department of Surgery at the Yale School of Medicine. The fund is to educate and train residents and fellows and to support stem cell research at the Yale School of Medicine in the Trauma and Surgical Critical Care Section of the Department of Surgery.

The George G. and Leah E. Posener Memorial Fellowship in Hematology and Stem Cell Research Established in 1995 by the generosity of George G. Posener in memory of his beloved wife Leah E. Posener and his brother Morris M. Posener (Yale Class of 1938) who received care at Yale-New Haven Hospital. To be awarded annually to assist financially a young physician/scientist whose research focuses on polycythemia vera and related blood diseases and also to support stem cell research.

Bertran Roberts Memorial Fund Originally established in 1955 by family members, friends, and colleagues, as an annual lecture in the field of psychiatry. In 1973 the family decided to use these funds not only for lectures, but also to assign summer stipends to medical students interested in field study or other projects in the field of social psychiatry.

Leon Rosenberg Medical Student Research Fund in Genetics Established in 2004 by Leon E. Rosenberg, M.D., former Dean of Yale School of Medicine, to be awarded to one medical student who elects to spend a fifth year at Yale School of Medicine engaged full time in research in the Department of Genetics.

Robert Shapiro, M.D., Memorial Fellowship in Diagnostic Radiology Established in 2000 to provide research support in all diagnostic interventional procedures for postdoctoral fellows in diagnostic radiology.

The Daniel B. Stryer, M.D. 1990, Class of 1990 International Clinical Rotation Fund Established in memory of Daniel Stryer to support the travel for an international clinical rotation of a highly motivated medical student in an underdeveloped country or a country where there is a pressing health care need.

The Thudichum Post-Doctoral Research Fellowship in Neuro-oncology Established in 2005 by Irene M. Voynick in honor of the nineteenth-century German medical practitioner and surgeon Johann Ludwig Wilhelm Thudichum (1828–1901), who characterized the chemical composition of the brain and is regarded as the pioneer of neurochemistry. This postdoctoral fellowship supports a Ph.D. or M.D./Ph.D. student for the study of brain tumors utilizing such areas as cell biology, neurochemistry, and adult stem cell research.

The Michael S. Voynick Fellowship in Neuro-oncology Established in 1997 for an annual award in recognition of distinguished contributions in the field of neuro-oncology, to be presented during a symposium to promote education in such areas as oncogenesis, novel and effective therapies, and neuroscience.

The Voynick Visiting Fellowship in Neuro-oncology Established in 2001 to support a visiting fellow who will engage in such investigative areas as tumor excisions and innovative therapies based on tumor cell biology and genetics.
The Jane Danowski Weiss Family Foundation Fellowship  Established in 2000 in memory of Dr. Thaddeus S. Danowski ’36, Mr. Edwin F. Danowski (Yale studies interrupted by World War II, killed in action in 1941), and Pelagia V. Danowski Sellers. To support medical students in a fifth year of research investigations in the areas of diabetes, stroke, and heart disease.

Susan Wolf, M.D. 1997, and William Greene, M.D., International Clinical Rotation Fund  Established to support the travel for an international clinical rotation of a highly motivated medical student in an underdeveloped country or a country where there is a pressing health care need.

Herman H. and Sarah Zusman Student Research Fellowship  Established in 2009 by the Zusman family to support the short-term (Summer) research of a highly motivated M.D. student with an interest in the basic and/or clinical sciences with a focus on cardiovascular medicine/surgery/physiology.
Honors and Prizes

COMMENCEMENT AWARDS, MAY 2010

Cum laude  The degree of Doctor of Medicine cum laude will be conferred on students whose academic performance shows unusual merit. Input from the clinical departments is included in the selection. Emma Longley Barber, Ravi Raja Kavasery, Elizabeth Jean Kvach, Adam Licurse, Katherine Marie Mullen, Sotiria Palioura, Joshua Isaac Weiner

ACP-ASIM Internal Medicine Award  Awarded to a graduating student who will be entering a categorical or primary care internal medicine residency in Connecticut and has demonstrated outstanding academic achievement and community service. Sudipa Sarkar

American Academy of Neurology Award  Awarded to recognize a graduating medical student for excellence in clinical neurology. Kathryn Anne Giblin

Norma Bailey Berniker Prize  Established in 1970 by bequest of John H. Bailey, B.A. 1900, M.D. 1903. To be awarded to members of the graduating class who give promise of best exemplifying the disciplines and precepts of the Oath of Hippocrates and the Prayer of Maimonides. Emma Longley Barber, Philip Johannes Butler, Elizabeth Jean Kvach, Tracy St. Louis MacIntosh, Yasha S. Modi, Onyinye Offor, Katherine Day Rose, Matthew Vestal

The Campbell Prize  Founded in 1900 by bequest from James Campbell, honorary M.A. 1891, Professor of Obstetrics and Gynecology 1886 to 1899. Awarded to the graduating students who secure the highest rank on Step Two of the National Board Examination. Konstantin Krepkin

Connecticut Academy of Family Physicians Award  Established in 1994 to recognize outstanding students entering a career in Family Practice. JoAnna Chandra Salmon

Connecticut Chapter of American College of Surgeons Prize  Awarded to graduating students for excellence in the surgical sciences. Carolyn Graham Goldberg, Joshua Isaac Weiner

The Cortlandt Van Rensselaer Creed Award  Established in 1999 in honor of Cortlandt Van Rensselaer Creed, M.D. 1857, the first African American graduate of Yale University School of Medicine. Awarded through peer nomination to graduating, underrepresented, minority students in medicine and public health who has demonstrated outstanding academic achievement, exemplary leadership, and a significant commitment to the community at large. Hasani Kigos Baharanyi, Tracy St. Louis MacIntosh

Miriam Kathleen Dasey Award  Established in 1950 in honor of Miriam Kathleen Dasey, Registrar from 1921 to 1950. To be presented annually to students who by strength of character, personal integrity, and academic achievement give promise of fulfilling the ideal of the compassionate physician. Juliana Chen, Justin Brent Cohen, Kathryn Anne Giblin, Yoshio Arturo Kaneko, Ravi Raja Kavasery, Gifty Kwakye Darkoh, Robert Leone, Sonja K. Rakowski, Deepak Angara Rao, Magdalena Maria Reyes, Martina Trinese
Sanders-Spight, Daniel A. Solomon, Heather Korkosz Speller, Nicholas Roger Villalon, David Anthony Wacker, Jacqueline Deanna Wilson

**The Dean's Prize for Community Service**  This annual award recognizes the graduating students who, by leadership and service, have made major contributions to the School of Medicine, to the New Haven community, or to the community at large. Martina Trinese Sanders-Spight, Audrey Margaret Provenzano

**Selma and Karl Folkers Prize in Biomedical Research**  This prize is awarded to graduating M.D./Ph.D. students whose thesis research has demonstrated excellence in basic cell and molecular biology. Allison Fitzgerald Carey, Matthew S. Hayden

**Arnold P. Gold Foundation Humanism in Medicine Award**  Established to honor a graduating student who demonstrates the highest standard of compassion and sensitivity in his or her interaction with patients. Audrey Margaret Provenzano

**The Peter A. T. Grannum Prize**  Established in 1990. Awarded to outstanding African American graduates. This annual award is supported by the Shirley, Maggie and Hugh Comer Fund. David Eric Myles

**The M.D./Ph.D. Alumni Award**  Awarded to graduating M.D./Ph.D. students who have demonstrated outstanding academic achievements, leadership, and service. Dario Joseph Englot, Vinita Takiar

**The M.D./Ph.D. Award**  Awarded to outstanding members of the graduating M.D./Ph.D. class who have shown excellence in both research and clinical activities. Wenya Linda Bi, Joanna Y. Chin, Deepak Angara Rao

**New England Pediatric Society Prize**  Awarded to that member of the graduating class entering pediatrics who in the opinion of peers and faculty best exemplifies those qualities one looks for in a pediatrician: “A competent, caring, good humored person whom I would want to take care of my children.” Stephanie Ngoc Tu Nguyen

**The Parker Prize**  Established in 1914 by bequest from Frank J. Parker, Ph.D. 1895, M.D. 1898. Awarded annually to the graduating students who, during the course, have shown the best qualifications for a successful physician. Adam Licurse, Monica Clare Mix, Christina Lorraine Shenvi

**The Perkins Prize**  Awarded to the student who achieves the highest rank on Step One of the National Board Examination. Deepak Angara Rao

**Mila Rainof Award**  The Mila Rainof Award will be given each year to a graduating Yale medical student entering the field of emergency medicine who, like Mila, has contagious enthusiasm for caring for patients, while bringing attention, kindness and compassion to each interaction. Tracy St. Louis MacIntosh

**The Dr. David and Arthur Schuman Award of Excellence in Family Practice**  Awarded annually to recognize a student or resident in the State of Connecticut for his or her academic excellence and contributions to the Connecticut Academy of Family Physicians and other organizations that promote understanding of the specialty of family medicine. Elizabeth Jean Kvach
The Society for Academic Emergency Medicine Award  Awarded to the student who has demonstrated excellence in the specialty of emergency medicine. Kamila Janetta Sikora

Lauren Weinstein Award  Established in 1992 in memory of Lauren Weinstein (Yale medical student 1988–1989). Given to a student who displays courage, perseverance, and compassion and has dared to reach for the best in herself or himself. Wenya Linda Bi

The Milton C. Winternitz Prize in Pathology  Established in 1950 in honor of Milton Charles Winternitz, honorary M.A. 1917, Professor of Pathology and Bacteriology 1917–1925, Anthony N. Brady Professor of Pathology 1925–1950. Awarded to the second-year student who, in the opinion of the staff of the Department of Pathology, did outstanding work in the course. Not awarded in 2010

THESIS PRIZES, MAY 2010

The American Cancer Society Prize  Given by the Connecticut Chapter of the American Cancer Society and awarded to a graduating student for an outstanding thesis in the area of cancer. Not awarded in 2010

The Association for Academic Surgery–Novartis Research Award  Awarded to the senior medical student entering a surgical field, who has done outstanding research during medical school. Joshua Isaac Weiner

The Peter F. Curran Prize  Established in 1976. To be presented to a graduating medical student for an outstanding thesis. Peter F. Curran was Professor of Physiology at Yale, 1967 to 1974. Not awarded in 2010

Wilber G. Downs, M.D., M.P.H., Prize for the Outstanding Thesis in International Health  Established in 1988 for the best thesis in the area of international health. Not awarded in 2010

The Ferris Prize  Established in 1934 and endowed in 1937 by anonymous donors in honor of Harry Burr Ferris, A.A. 1887, M.D. 1890. Awarded to a graduating student for an outstanding thesis. Yasha S. Modi

The William U. Gardner Thesis Prize  Established in 1989 by Dr. Gardner’s widow and awarded to the graduating student with the most outstanding thesis in the graduating class. David Adam Gimbel

The Nicholas J. Giarman Prize  Established in 1976. Nicholas Giarman was Professor of Pharmacology, 1949 to 1968. To be presented to a student for an outstanding thesis. Emma Longley Barber

The Keese Prize  Established in 1880 by bequest from Mary M. Keese in memory of her son, Hobart Keese, M.D. 1855. Awarded annually to a student who presents an outstanding thesis. Katherine Marie Mullen

The Laboratory Medicine Award  Established in 1988 for the best thesis in the area of laboratory medicine. Sponsored by the Department of Laboratory Medicine. Elizabeth Jean Kvach
The Dr. Harold H. Lamport Biomedical Research Prize  Established in 1976. To be presented to a student for an outstanding thesis reporting original biomedical research. Robert Leone

The Ldz Prize in Psychiatry  Awarded to a graduating student for an outstanding thesis in the field of psychiatry. Jonathan Conrad Romanysyn

The M.D./Ph.D. Thesis Prize  Awarded to the graduating M.D./Ph.D. student with the most outstanding dissertation. Sotiria Palioura

The Dr. Louis H. Nahum Prize  Founded in 1973 by bequest from Louis H. Nahum, M.D. 1916. Awarded annually to a member of the senior class of the School of Medicine, who merits such an award by virtue of the excellence of the thesis which the student has written as required for the medical degree. Christopher Perry Miller

The John P. Peters Prize  Established in 1976. To be presented to a student for an outstanding thesis in the area of internal medicine. John P. Peters was Professor of Medicine at Yale, 1927 to 1955. Ravi Raja Kavasery

The Louis G. Welt Prize  Established in 1976. To be presented to a student for an outstanding thesis. Louis Welt was Chairman and Professor of Medicine, 1972 to 1974. Adam Licurse

STUDENT RESEARCH DAY ORAL PRESENTATIONS, MAY 11, 2010

David Gimbel. *The role of cellular prion protein in Alzheimer’s disease* (Dr. Stephen Strittmatter, Neurology)

Elizabeth Kvach. *Diagnosis of Clostridium difficile infection* (Dr. Marie-Louise Landry, Laboratory Medicine)

Yasha Modi. *Lymphocyte function-associated antigen mediated HuR dependent stabilization of VEGF mRNA in macrophages* (Dr. Jeffrey Bender, Internal Medicine)

Katherine Mullen. *The dual language system: Preterm children at age 16 years* (Dr. Laura Ment, Pediatrics)

Sotiria Palioura. *The 21st amino acid, selenocysteine, and autoimmune hepatitis* (Dr. Dieter Söll, Molecular Biophysics and Biochemistry)

AWARDS TO FACULTY AND HOUSE STAFF, MAY 2010

The Francis Gilman Blake Award  Established in 1952 by Nu Sigma Nu. Endowed by Dr. Robert C. Kirk, B.S. 1930, as a memorial to his twin brother, Dr. Gilman D. Kirk, B.S. 1930. Awarded annually to that member of the faculty of the School of Medicine designated by the senior class as the most outstanding teacher of the medical sciences. Aldo J. Peixoto, M.D., Associate Professor of Medicine (Nephrology); Associate Chief, VACHS Medical Service; Director, Renal Pathophysiology Course
Bohrmalk Prizes  Established in 1989 under the terms of the Alice Bohmalk Charitable Trust. Prestigious teaching prizes will be awarded annually to individuals who have made outstanding contributions to the teaching program, one in the basic sciences and one in the clinical sciences, as judged by the faculty and students. Basic Science: Peter A. Takizawa, Ph.D., Assistant Professor of Cell Biology. Clinical Sciences: Matthew R. Grossman, M.D., Assistant Professor of Pediatrics (Hospitalist); Assistant Director, Pediatric Residency Program; Medical Director, Infant-Toddler Unit

The Alvan R. Feinstein Award  Presented to a Yale University School of Medicine faculty member chosen as the outstanding teacher of the year of clinical skills by a committee of chairs of the clinical departments, associate chairs, and students. Cyrus Kapadia, M.D., Professor of Medicine (Digestive Diseases); Program Director, Traditional Internal Medicine Residency Program

The Leah M. Lowenstein Award  Presented annually by the Office for Women in Medicine to members of the faculty who most clearly represent the highest degree of excellence in the promotion of humane and egalitarian medical education. Jessica L. Illuzzi, M.D., Assistant Professor of Obstetrics, Gynecology, and Reproductive Sciences. Benjamin R. Doolittle, M.D., M.Div., Assistant Professor of Medicine (General Medicine) and Pediatrics; Director, Internal Medicine-Pediatrics Residency Program

The Leonard Tow Humanism in Medicine Award Presented by The Arnold P. Gold Foundation  Established in 1998 to honor the faculty member who demonstrates the highest standard of compassion and sensitivity in his or her interaction with patients. Diana S. Beardsley, M.D., Ph.D., Associate Professor of Pediatrics and Medicine (awarded posthumously)

The Betsy Winters House Staff Award  Established in 1972 by the Fourth-Year Class and presented annually to that member of the House Staff of the Yale-New Haven Medical Center, designated by the graduating class, who has made the most significant contribution to the education of medical students. Loren Berman, M.D., Resident, Surgery
General Information

HUMAN RELATIONS CODE OF CONDUCT

Yale University School of Medicine is committed to the promotion of personal and professional development of all individuals in its community, and encourages dialogue that will foster the growth, well-being, and dignity of all its members. In pursuit of these goals, the School is dedicated to maintaining an environment that places the highest priority on collegial relationships, mutual respect, and sensitivity among its students, faculty, staff, and patients. An educational community functions best when there is civility and respect for the dignity and worth of each individual. It must be ensured that the School is free from discrimination and acts of intolerance such as those based on sex, race, color, religion, age, disability, status as a special disabled veteran, veteran of the Vietnam era or other covered veteran, national or ethnic origin, sexual orientation, or gender identity or expression. This commitment remains consonant with the obligation to protect open and wide-ranging public discourse. The principle of freedom of expression that might otherwise protect even the most offensive public speech does not protect, nor does it even encompass, a right to threaten the dignity and privacy of an individual. Such personally directed behavior will not be tolerated; it is antithetical to academic values, debilitates its victims, compromises the offenders, and undermines the University’s fundamental commitment to individual freedom and respect for all its members. Furthermore, acts of intolerance may destroy the very atmosphere wherein freedom of expression is otherwise tolerated and cherished.

GRIEVANCE PROCEDURES

The expectation at Yale School of Medicine is that all members of the community will conduct themselves professionally and respectfully. The following statement has been issued by the Association of American Medical Colleges (AAMC) regarding institutional standards of behavior in the learning environment:

The medical learning environment is expected to facilitate students’ acquisition of the professional and collegial attitudes necessary for effective, caring, and compassionate health care. The development and nurturing of these attitudes is enhanced and, indeed, based on the presence of mutual respect between teacher and learner. Characteristic of this respect is the expectation that all participants in the educational program assume their responsibilities in a manner that enriches the quality of the learning process.

While these goals are primary to a school’s educational mission, it must be acknowledged that the social and behavioral diversity of students, faculty, residents, and staff, combined with the intensity of the interactions between them, will, from time to time, lead to alleged, perceived, or real incidents of inappropriate behavior or mistreatment of individuals.

At Yale there are several mechanisms in place to deal with such incidents, as follows.
Sexual Harassment

Sexual harassment is not tolerated at Yale School of Medicine. During orientation in the first year and again early in the third year before starting clinical rotations, students have mandatory training sessions in sexual harassment and assault.

The Sexual Harassment and Assault Resources and Education (SHARE) Center

The SHARE Center is located at Yale Health and has a director on staff to address and respond to victims of sexual assault and sexual harassment. There is a sexual assault or harassment response line (203.432.6653) available twenty-four hours a day, seven days a week in the event of a crisis or the need for information on how to proceed in the event of an assault. Students who are the victims of sexual harassment or assault may feel stunned, afraid, disoriented, or stigmatized and will need help and advice about making decisions. That help is available at all times. Web site: www.yale.edu/yuhs (under Students, link to Sexual Harassment and Assault). The Web site provides additional, detailed information about sexual assault and harassment; how to get help; possible steps to take; availability of medical, legal, and psychological care; additional resources; as well as basic information and facts, definitions, and beliefs about sexual assault and harassment.

Dean’s Board on Sexual Harassment

The “Grievance Procedures for Complaints of Sexual Harassment Brought by Faculty, Students, and Postdoctoral Fellows at Yale University School of Medicine” defines sexual harassment, includes a formal policy statement condemning it, provides for the appointment of a Dean’s Board on Sexual Harassment, urges mediation, stresses confidentiality, describes informal and formal methods of dealing with complaints, lists possible sanctions, considers protection from retaliation, and notes alternative channels for redress. Copies of these procedures and the names of the members (including student representation) of the Dean’s Board on Sexual Harassment are listed on the Web site: http://medicine.yale.edu/owm (under Our Services, click on Sexual harassment procedures). Medical students may consult any of the members of the board informally, or may opt to bring a formal complaint.

Sexual Assault

Sexual assault is defined as any undesired physical contact of a sexual nature perpetrated against another person. While associated with rape, sexual assault is much broader. According to the U.S. Department of Health and Human Services, sexual assault is any type of sexual activity that one does not agree to, including:

- Inappropriate touching
- Vaginal, anal, or oral penetration
- Nonconsensual sexual intercourse
- Rape
- Attempted rape

Sexual assault and rape can be perpetrated by a date, a friend, an acquaintance, a family member, someone in authority, or a stranger. Sexual assault happens to both men and
women regardless of race, class, religion, sexual orientation, age, and ability. Perpetrators of sexual assault can also be a man or woman from any race, class, religion, sexual orientation, age, and ability.

The above information is taken from materials put together by SHARE, Sexual Harassment and Assault Resources and Education. SHARE, located at Yale Health, can be contacted twenty-four hours a day. Weekdays between the hours of 8:30 a.m. and 5 p.m., calls to 203.432.6653 will be answered by mental health professionals. After hours, between 5 p.m. and 8:30 a.m. and on weekends, calls to that number will be connected to the sexual assault crisis line. If you have been sexually assaulted, you should call that number as soon as possible and follow instructions about what to do next. The Web site is www.yale.edu/yuhs (under Students, link to Sexual Harassment and Assault).

Racial and Ethnic Harassment

The Committee on Multicultural Affairs, chaired by the assistant dean for multicultural affairs, was created to combat racial and ethnic insensitivity and harassment throughout the School of Medicine. Vigorous steps are taken to investigate any allegation, to counsel the offender, and to recommend disciplinary action, if necessary.

In addition, any student, employee, or applicant for programs or employment at Yale who is concerned about affirmative action, equal opportunity, sexual harassment, racial harassment, or fairness in admissions or employment at Yale, either in a general sense or with respect to his or her own situation, is encouraged to contact the Office for Equal Opportunity Programs. The Web site is www.yale.edu/equalopportunity. If an informal resolution has not been achieved and the student wishes to pursue the complaint further, he or she may request the President’s Committee on Racial and Ethnic Harassment to consider the matter.

Student Mistreatment, Abuse, and Harassment Peer Advocates

In addition to the above mechanisms for addressing harassment, there is a peer-advocate program. Two Peer Advocates are named by students in the second year, third year, fourth year, and fifth year; one Peer Advocate is named from the M.D./Ph.D. program, and one from the Physician Associate program. Peer Advocates’ names and beeper numbers are distributed to the student body on laminated cards that can be carried in the student’s ID sheath and be consulted at all times. Students are encouraged to consult any of the Peer Advocates regarding issues of mistreatment, abuse, and harassment or to reality-check about incidents that they find disturbing or concerning. The Peer Advocates, who can be accessed anonymously if desired, are trained each year in a session with the director of mental health services at Yale Health. Those problems that need a higher level of attention are brought to the advisory committee, which is made up of all the Peer Advocates as well as the director of mental health services, the assistant dean for multicultural affairs, the ombudsperson, the associate dean for graduate medical education, several respected faculty, and the associate dean for student affairs. Confidentiality is assured to the extent allowed by law. Peer Advocates are available for thinking through options and helping the student decide on different levels of attention to a problem. Action can range from merely noting the problem to taking it to the department chair and the dean
of the medical school. It is important to note that Peer Advocates are not mental health counselors, but they are trained in how to get help to a student who needs mental health services. Any members of the advisory committee may be contacted directly by a student.

**Power Day**

Issues of abuse of power as experienced by students at all levels are made the topic of discussion at Power Day I, before the students in the third year start their clinical rotations, and again at Power Day II near the end of the third year. These discussions are held throughout the clinical year in the departments of Internal Medicine; Pediatrics; Obstetrics, Gynecology, and Reproductive Sciences; and Surgery.

**Dean’s Procedure for Students’ Complaints**

This procedure governs any case in which a student has a complaint, including but not limited to a complaint of sexual harassment or a complaint of discrimination on the basis of race, sex, color, religion, national or ethnic origin, disability, or sexual orientation, against a member of the faculty or administration of the complainant’s school.

**Provost’s Procedure for Students’ Complaints**

This procedure governs any case in which a student has a complaint, including but not limited to a complaint of sexual harassment or a complaint of discrimination on the basis of race, sex, color, religion, national or ethnic origin, disability, or sexual orientation, against a faculty member who is not a member of the faculty of the complainant’s school, or against an employee who is not an administrator of the student’s school or who is not subject to discipline by the student’s dean. This procedure is to be used for all complaints of discrimination on the basis of disability where structural modifications of University facilities is the remedy sought.

**Progress Committee**

The Progress Committee is made up of approximately twelve highly respected faculty members from different departments. The registrar and associate dean for student affairs are ex-officio members, and the committee is chaired by a senior faculty member. Faculty serving on the Progress Committee are thoughtful and fair individuals who have a deep interest in the well-being of students. The committee meets regularly to review the progress of students, to decide whether each student should progress into the next year, and to consider special situations and disciplinary actions. When a question arises that cannot wait for the next full meeting of the Progress Committee, an emergency meeting may be called, a subcommittee may be convened, or members of the Progress Committee may be polled for their opinions by phone or e-mail.

The Progress Committee determines whether a student is making appropriate progress toward becoming a safe and effective physician by reviewing his or her record for academic standing, the ability to synthesize and apply knowledge, moral and ethical character, professional behavior, evidence of good judgment and a sense of responsibility, sensitivity and compassion for individual needs, and emotional stability. The committee may take into account the academic record of the student, performance on board
exams, letters and reports regarding incidents of unprofessional behavior, and personal testimony.

If, in the opinion of the Progress Committee, an action needs to be taken that in some way alters the normal progress of a student through the curriculum, the student will be notified in writing of the committee’s decision. Such actions include but are not limited to:

- Repeating a portion of the curriculum (a single course or a full year)
- Taking a leave of absence
- Placement on academic probation
- Suspension from matriculation
- Dismissal

The terms of the decision, including the requirements for return to fully matriculated student status and the consequences of not progressing satisfactorily over a specified timeline, will be clearly defined in the written notification.

If a student protests the decision of the Progress Committee, he or she may petition a hearing of the committee and may appear alone, with a member or members of the faculty, or with legal counsel. Legal counsel at these meetings is for the purpose of support only. Final decisions of the Progress Committee may be appealed directly to the dean of the School of Medicine.

A student having academic or professional problems being considered by the Progress Committee may be asked to choose or be assigned a neutral faculty advocate who has no responsibility for evaluating or promoting that student. The role of this person is to be available to the student for advice and to keep the student on track.

Language regarding disciplinary action taken by the Progress Committee may appear in the student’s dean’s letter.

Students requesting to take more than five years to complete medical school (more than six years for a joint-degree student in business or public health, more than seven years for a joint-degree student in law), must petition the Progress Committee in writing.

ADVISING AT YALE SCHOOL OF MEDICINE

Every Yale School of Medicine student is assigned a faculty academic adviser. The four advisers are highly regarded faculty members who have demonstrated dedication to and interest in students and undergraduate medical education. Each has 20 percent of his or her effort supported by the dean for this role. The advisers work closely with and report to the dean for student affairs. The advisers meet periodically with their advisees one-on-one and in groups to help students having academic difficulties or questions and to offer advice on navigating the journey through medical school and beyond. They are responsible for writing their advisees’ deans’ letters or MSPEs.

In addition, the associate dean for student affairs is available to all students to assist with problems of any nature, especially personal issues that students may wish to keep separate from their academic progress. The associate dean meets one-on-one with every first-year student and any student requesting it throughout medical school. She or he writes letters of recommendation for students applying for scholarships, fellowships, joint-degree programs, and the like; edits the deans’ letters for consistency; and co-signs
them. The associate dean meets weekly with the academic advisers to discuss themes that may emerge regarding students’ academic problems in order to bring broader attention to these themes and issues.

Finally, the Big Sib/Little Sib Program, which pairs first-year medical students with second-years, is contained within the adviser groups in order to promote inter-class communication and collaboration.

LEAVES OF ABSENCE

Students are expected to follow a continuous course of study at the School of Medicine. However, a student who wishes or needs to interrupt his or her study temporarily may request a leave of absence. There are three types of leave—personal, medical, and parental—all of which are described below. The general policies that apply to all types of leave are:

1. Any student who is contemplating a leave of absence should see the associate dean for student affairs to discuss the necessary application procedures.

2. All leaves of absence must be approved by the associate dean. Medical leaves also require the written recommendation of a Yale Health physician, as described below.

3. A student may be granted a leave of absence of one year with possible extension for one additional year. Any approved leave will be for a specified period.

4. International students who apply for a leave of absence must consult with OISS regarding their visa status.

5. A student on leave of absence may complete outstanding work in any course for which he or she has been granted extensions. He or she may not, however, fulfill any other degree requirements during the time on leave.

6. A student on leave of absence is not eligible for financial aid, including loans; and in most cases, student loans are not deferred during periods of nonenrollment.

7. A student on leave of absence is not eligible for the use of any University facilities normally available to enrolled students.

8. A student on leave of absence may continue to be enrolled in Yale Health by purchasing coverage through the Student Affiliate Coverage plan. In order to secure continuous coverage from Yale Health, enrollment in this plan must be requested prior to the beginning of the term in which the student will be on leave or, if the leave commences during the term, within thirty days of the date when the leave is approved. Coverage is not automatic; enrollment forms are available from the Member Services department of Yale Health, 203.432.0246.

9. A student on leave of absence must notify the associate dean of student affairs in writing of his or her intention to return at least eight weeks prior to the end of the approved leave. In addition, if the returning student wishes to be considered for financial aid, he or she must submit appropriate financial aid applications to the School’s financial aid office to determine eligibility.

10. A student on leave who does not return at the end of the approved leave, and does not request and receive an extension from the associate dean, is automatically dismissed from the School.
General Information

Personal Leave of Absence
A student who wishes or needs to interrupt study temporarily because of personal exigencies may request a personal leave of absence. A student who is in good standing is eligible for a personal leave of absence. The general policies governing all leaves of absence are described above.

To request a personal leave of absence, the student must apply in writing, explaining the reasons for the proposed leave and stating both the proposed start and end dates of the leave and the address at which the student can be reached during the period of the leave. If the associate dean finds the student to be eligible, the leave will be approved. In any case, the student will be informed in writing of the action taken. A student who does not apply for a personal leave of absence, or whose application for a personal leave is denied, and who does not register, will be considered to have withdrawn from the School.

Medical Leave of Absence
A student who must interrupt study temporarily because of illness or injury may be granted a medical leave of absence with the approval of the associate dean, on the written recommendation of the director of Yale Health or the chief psychiatrist. The general policies governing all leaves of absence are described above. A student who is in good standing is eligible for a medical leave any time after matriculation. The final decision concerning a request for a medical leave of absence will be communicated in writing by the associate dean.

The School of Medicine reserves the right to place a student on a medical leave of absence when, on the recommendation of the director of Yale Health or the chief of the Department of Mental Health and Counseling, the associate dean for student affairs determines that the student is a danger to self or others because of a serious medical problem. A student who is placed on medical leave during any term will have his or her tuition adjusted according to the same schedule used for withdrawals (see Tuition Rebate and Refund Policy). Before re-registering, a student on medical leave must secure written permission to return from a Yale Health physician.

Leave of Absence for Parental Responsibilities
A student who wishes or needs to interrupt study temporarily for reasons of pregnancy, maternity care, or paternity care may be granted a leave of absence for parental responsibilities. The general policies governing all leaves of absence are described above. A student who is in good standing is eligible for parental leave any time after matriculation.

Any student planning to have or care for a child is encouraged to meet with the associate dean for student affairs to discuss leaves and other short-term arrangements. For many students, short-term arrangements rather than a leave of absence are possible. Students living in University housing units are encouraged to review their housing contract and the related policies of the Graduate Housing Office before applying for a parental leave of absence. Students granted a parental leave may continue to reside in University housing to the end of the academic term for which the leave was first granted, but no longer.
U.S. Military Leave Readmissions Policy

Students who wish or need to interrupt their studies to perform U.S. military service are subject to a separate U.S. military leave readmissions policy. In the event a student withdraws or takes a leave of absence from Yale School of Medicine to serve in the U.S. military, the student will be entitled to guaranteed readmission under the following conditions:

1. The student must have served in the U.S. Armed Forces for a period of more than thirty consecutive days;
2. The student must give advance written or verbal notice of such service to the associate dean for student affairs. In providing the advance notice the student does not need to indicate whether he or she intends to return. This advance notice need not come directly from the student, but rather, can be made by an appropriate officer of the U.S. Armed Forces or official of the U.S. Department of Defense. Notice is not required if precluded by military necessity. In all cases, this notice requirement can be fulfilled at the time the student seeks readmission, by submitting an attestation that the student performed the service.
3. The student must not be away from the School of Medicine to perform U.S. military service for a period exceeding five years (this includes all previous absences to perform U.S. military service but does not include any initial period of obligated service). If a student’s time away from the School of Medicine to perform U.S. military service exceeds five years because the student is unable to obtain release orders through no fault of the student or the student was ordered to or retained on active duty, the student should contact the associate dean for student affairs to determine if the student remains eligible for guaranteed readmission.
4. The student must notify the School of Medicine within three years of the end of the U.S. military service of his or her intention to return. However, a student who is hospitalized or recovering from an illness or injury incurred in or aggravated during the U.S. military service has up until two years after recovering from the illness or injury to notify the School of Medicine of his or her intent to return; and
5. The student cannot have received a dishonorable or bad conduct discharge or have been sentenced in a court-martial.

A student who meets all of these conditions will be readmitted for the next term, unless the student requests a later date of readmission. Any student who fails to meet one of these requirements may still be readmitted under the general readmission policy but is not guaranteed readmission.

Upon returning to the School of Medicine, the student will resume his or her education without repeating completed course work for courses interrupted by U.S. military service. The student will have the same enrolled status last held and with the same academic standing. For the first academic year in which the student returns, the student will be charged the tuition and fees that would have been assessed for the academic year in which the student left the institution. The School of Medicine may charge up to the amount of tuition and fees other students are assessed, however, if veteran’s education benefits will cover the difference between the amounts currently charged other students and the amount charged for the academic year in which the student left.
In the case of a student who is not prepared to resume his or her studies with the same academic status at the same point at which the student left or who will not be able to complete the program of study, the School of Medicine will undertake reasonable efforts to help the student become prepared. If after reasonable efforts, the School determines that the student remains unprepared or will be unable to complete the program or after the School determines that there are no reasonable efforts it can take, the School may deny the student readmission.

RESIDENCE AND DINING FACILITIES

Edward S. Harkness Memorial Hall

Harkness Hall, located only steps away from the School of Medicine and Yale-New Haven Hospital, houses students from the Schools of Medicine, Nursing, and Public Health and from the Physician Associate program. Residents of Harkness Hall live in a secure building with recently renovated single rooms, and they have access to many amenities including computer network access in all units. Yale administrative offices occupy the first through third floors of the building. The great advantages of living in Harkness Hall are its close proximity to classes, and the opportunity it provides in bringing together students from the various medical-related fields in a relaxed social setting.

Accommodations include single rooms with sinks, a limited number of two-room suites, a popular dining hall, television lounges, kitchenettes, and other recreational rooms. All dormitory rooms are furnished, and all rooms must be single occupancy. Dormitory room rental rates are $5,000 to $7,000 during the 2010–2011 academic year (August 2010 to May 2011). Rent includes Ethernet hook-up, cable television, and all utilities except telephone. A Marigolds meal plan is mandatory for all residents of Harkness Hall.

The first floor houses a dining and lounge area, known as Marigolds, which is open to the Yale community and provides both intimate and large gathering spaces for socializing, reading, watching television, and other activities. A Steinway baby-grand piano is also available for residents. The building contains limited resident storage including a bike storage area, an exercise/weight room, a billiard room, and a laundry room. The Class of 1958 Fitness Center, which opened during the 1999–2000 school year, contains a wide assortment of cardiovascular and weight training equipment. All residents of Harkness dorm as well as medical, public health, physician associate, and nursing students are welcome to use this center, where student ID card scanners provide access. There is no fee for Harkness residents. All medical center program students can use the gym on a fee basis. All users are required to register for gym membership.

For information about Edward S. Harkness Memorial Hall or other Yale graduate residences, contact the Graduate Housing Office at 203.432.2167; or visit the Web site www.yale.edu/gradhousing/incoming/buildings.html.

Dining Services

Marigolds, located at the School of Medicine, is the popular student dining area and gathering place in Edward S. Harkness Hall. Marigolds, which is open from 7:30 a.m. until 7 p.m., Monday through Friday, offers continental and hot breakfast, lunch, and
dinner. A late-night coffee bar is slated to open in the fall. Dining hours are shortened during summer and vacation periods. Faculty members, students, and staff are welcome to dine at the dining hall on an à la carte basis.

Students living in Harkness dormitory are required to participate in a meal plan. The rate for the 2010–2011 academic year is $2,858 per year for dormitory residents. The meal plan is a debit-balance system allowing students to spend their board points anytime that the dining room is open. Students on this plan can transfer a meal into any Yale Dining location, seven days a week. Pricing is à la carte.

All first- and second-year medical students living off campus will be assessed a mandatory off-campus board fee of $570 per year. This dining charge was initiated to encourage all medical students to socialize in the Harkness Student Center, regardless of whether they live in the dormitory.

HEALTH SERVICES FOR STUDENTS

The new Yale Health Center opens on campus at 55 Lock Street in late summer 2010 (until then, services will be provided at the 17 Hillhouse Avenue location). The center is home to Yale Health, a not-for-profit, physician-led health coverage option that offers a wide variety of health care services for students and other members of the Yale community. Services include student medicine, gynecology, mental health, pediatrics, pharmacy, laboratory, radiology, a seventeen-bed inpatient care facility (ICF), a round-the-clock acute care clinic, and specialty services such as allergy, dermatology, orthopedics, and a travel clinic. Yale Health coordinates and provides payment for the services provided at the Yale Health Center, as well as for emergency treatment, off-site specialty services, inpatient hospital care, and other ancillary services. Yale Health’s services are detailed in the Yale Health Student Handbook, available through the Yale Health Member Services Department, 203.432.0246, or online at www.yale.edu/yhp.

Eligibility for Services

All full-time Yale degree-candidate students who are paying at least half tuition are enrolled automatically for Yale Health Basic Coverage. Yale Health Basic Coverage is offered at no charge and includes preventive health and medical services in the departments of Student Medicine, Internal Medicine, Gynecology, Health Education, and Mental Health & Counseling. In addition, treatment for urgent medical problems can be obtained twenty-four hours a day through Acute Care.

Students on leave of absence or on extended study and paying less than half tuition are not eligible for Yale Health Basic Coverage but may enroll in Yale Health Student Affiliate Coverage. Students enrolled in the Division of Special Registration as nondegree special students or visiting scholars are not eligible for Yale Health Basic Coverage but may enroll in the Yale Health Billed Associates Plan and pay a monthly premium. Associates must register for a minimum of one term within the first thirty days of affiliation with the University.

Students not eligible for Yale Health Basic Coverage may also use the services on a fee-for-service basis. Students who wish to be seen fee-for-service must register with the Member Services Department. Enrollment applications for the Yale Health Student
Affiliate Coverage, Billed Associates Plan, or Fee-for-Service Program are available from the Member Services Department.

All students who purchase Yale Health Hospitalization/Specialty Coverage (see below) are welcome to use specialty and ancillary services at Yale Health Center. Upon referral, Yale Health will cover the cost of specialty and ancillary services for these students. Students with an alternate insurance plan should seek specialty services from a provider who accepts their alternate insurance.

**Health Coverage Enrollment**

The University also requires all students eligible for Yale Health Basic Coverage to have adequate hospital insurance coverage. Students may choose Yale Health Hospitalization/Specialty Coverage or elect to waive the plan if they have other hospitalization coverage, such as coverage through a spouse or parent. The waiver must be renewed annually, and it is the student’s responsibility to confirm receipt of the waiver form by the University’s deadlines noted below.

**Yale Health Hospitalization/Specialty Coverage**

For a detailed explanation of this plan, see the [Yale Health Student Handbook](http://www.yale.edu/yhp/handbooks/documents/student_handbook), which is available online at www.yale.edu/yhp/handbooks/documents/student_handbook.

Students are automatically enrolled and charged a fee each term on their Student Financial Services bill for Yale Health Hospitalization/Specialty Coverage. Students with no break in coverage who are enrolled during both the fall and spring terms are billed each term and are covered from August 1 through July 31. For students entering Yale for the first time, readmitted students, and students returning from a leave of absence who have not been covered during their leave, Yale Health Hospitalization/Specialty Coverage begins on the day the dormitories officially open. A student who is enrolled for the fall term only is covered for services through January 31; a student enrolled for the spring term only is covered for services through July 31.

**Waiving Yale Health Hospitalization/Specialty Coverage** Students are permitted to waive Yale Health Hospitalization/Specialty Coverage by completing an online waiver form at www.yhpstudentwaiver.yale.edu that demonstrates proof of alternate coverage. It is the student’s responsibility to report any changes in alternate insurance coverage to the Member Services Department. Students are encouraged to review their present coverage and compare its benefits to those available under Yale Health. The waiver form must be filed annually and must be received by September 15 for the full year or fall term or by January 31 for the spring term only.

**Revoking the waiver** Students who waive Yale Health Hospitalization/Specialty Coverage but later wish to be covered must complete and send a form voiding their waiver to the Member Services Department by September 15 for the full year or fall term, or by January 31 for the spring term only. Students who wish to revoke their waiver during the term may do so, provided they show proof of loss of the alternate insurance plan and enroll within thirty days of the loss of this coverage. Yale Health premiums will not be prorated.
YALE HEALTH STUDENT TWO-PERSON AND FAMILY PLANS

A student may enroll his or her lawfully married spouse or civil union partner and/or legally dependent child(ren) under the age of nineteen in one of two student dependent plans: the Two-Person Plan or the Student Family Plan. These plans include services described in both Yale Health Basic Coverage and Yale Health Hospitalization/Specialty Coverage. Yale Health Prescription Plus Coverage may be added at an additional cost. Coverage is not automatic and enrollment is by application. Applications are available from the Member Services Department or can be downloaded from the Web site (www.yale.edu/yhp) and must be renewed annually. Applications must be received by September 15 for full-year or fall-term coverage, or by January 31 for spring-term coverage only.

YALE HEALTH STUDENT AFFILIATE COVERAGE

Students on leave of absence or extended study, students paying less than half tuition, or students enrolled in the Eli Whitney Program prior to September 2007 may enroll in Yale Health Student Affiliate Coverage, which includes services described in both Yale Health Basic and Yale Health Hospitalization/Specialty Coverage. Prescription Plus Coverage may also be added for an additional cost. Applications are available from the Member Services Department or can be downloaded from the Web site (www.yale.edu/yhp) and must be received by September 15 for full-year or fall-term coverage, or by January 31 for spring-term coverage only.

YALE HEALTH PRESCRIPTION PLUS COVERAGE

This plan has been designed for Yale students who purchase Yale Health Hospitalization/Specialty Coverage and student dependents who are enrolled in either the Two-Person Plan, the Student Family Plan, or Student Affiliate Coverage. Yale Health Prescription Plus Coverage provides protection for some types of medical expenses not covered under Yale Health Hospitalization/Specialty Coverage. Students are billed for this plan and may waive this coverage. The online waiver (www.yhpstudentwaiver.yale.edu) must be filed annually and must be received by September 15 for the full year or fall term or by January 31 for the spring term only. For a detailed explanation, please refer to the Yale Health Student Handbook.

Eligibility Changes

Withdrawal  A student who withdraws from the University during the first ten days of the term will be refunded the premium paid for Yale Health Hospitalization/Specialty Coverage and/or Yale Health Prescription Plus Coverage. The student will not be eligible for any Yale Health benefits, and the student’s Yale Health membership will be terminated retroactive to the beginning of the term. The medical record will be reviewed, and any services rendered and/or claims paid will be billed to the student on a fee-for-service basis. At all other times, a student who withdraws from the University will be covered by Yale Health for thirty days following the date of withdrawal or to the last day of the term, whichever comes first. Premiums will not be prorated or refunded. Students who withdraw are not eligible to enroll in Yale Health Student Affiliate Coverage.

Leaves of absence  Students who are granted a leave of absence are eligible to purchase Yale Health Student Affiliate Coverage during the term(s) of the leave. If the leave occurs...
during the term, Yale Health Hospitalization/Specialty Coverage will end on the date the leave is granted and students may enroll in Yale Health Student Affiliate Coverage. Students must enroll in Affiliate Coverage prior to the beginning of the term during which the leave is taken or within thirty days of the start of the leave. Premiums paid for Yale Health Hospitalization/Specialty Coverage will be applied toward the cost of Affiliate Coverage. Coverage is not automatic and enrollment forms are available at the Member Services Department or can be downloaded from the Web site (www.yale.edu/yhp). Premiums will not be prorated or refunded.

Extended study or reduced tuition  Students who are granted extended study status or pay less than half tuition are not eligible for Yale Health Hospitalization/Specialty Coverage and Yale Health Prescription Plus Coverage. They may purchase Yale Health Student Affiliate Coverage during the term(s) of extended study. This plan includes services described in both Yale Health Basic and Yale Health Hospitalization/Specialty Coverage. Coverage is not automatic and enrollment forms are available at the Member Services Department or can be downloaded from the Web site (www.yale.edu/yhp). Students must complete an enrollment application for the plan prior to September 15 for the full year or fall term, or by January 31 for the spring term only.

For a full description of the services and benefits provided by Yale Health, please refer to the Yale Health Student Handbook, available from the Member Services Department, 203.432.0246, 55 Lock Street, PO Box 208237, New Haven CT 06520–8237.

Required Immunizations

Measles (rubeola) and German measles (rubella)  All students who were born after December 31, 1956, are required to provide proof of immunization against measles (rubeola) and German measles (rubella). Connecticut state law requires two doses of measles vaccine. The first dose must have been given after January 1, 1969, and after the student’s first birthday. The second dose must have been given after January 1, 1980. These doses must be at least 30 days apart. Connecticut state law requires proof of one dose of rubella vaccine administered after January 1, 1969, and after the student’s first birthday. The law applies to all students unless they present (a) a certificate from a physician stating that such immunization is contraindicated, (b) a statement that such immunization would be contrary to the student’s religious beliefs, or (c) documentation of a positive blood titer for measles and rubella.

Meningococcus (meningitis)  All students living in on-campus housing must be vaccinated against meningococcal disease. The vaccine must have been received after January 1, 2006. Students who are not compliant with this law will not be permitted to register for classes or move into the dormitories for the fall term, 2010. Please note that the State of Connecticut does not require this vaccine for students who intend to reside off campus.

In addition to University requirements, all School of Medicine students must also meet immunization requirements of the various hospitals in which they will work. Yale-New Haven Hospital requires that, before beginning any clinical work, all students with negative serology be successfully vaccinated against hepatitis B and must ascertain that students are immune to polio, mumps, rubeola, rubella, and varicella. Those refusing the
hepatitis B vaccine must do so in writing at the time of matriculation. Students must show evidence that they have received a tetanus toxoid or tetanus-diphtheria booster within the past ten years. They must also show evidence of a PPD within the past year, or a chest X-ray for individuals known to be PPD positive.

Note: Students who have not met these requirements prior to arrival at Yale University must receive the immunizations from Yale Health and will be charged accordingly.

Any students who will be traveling abroad should make an appointment in the Travel Clinic at Yale Health at least six to eight weeks prior to departure. In addition, those who are working in areas where they might encounter blood or fluid exposure must contact the Student Medicine Department (203.432.0312) at Yale Health. Such students will be given a seven-day supply of antiretroviral medication at no charge. They will also receive instructions about how to handle possible exposure.

DISABILITY INSURANCE

Yale University School of Medicine provides a long-term disability program for each active medical student starting in the first year. (A student may not be on a leave of absence, suspended, or In Absentia to Submit.) Coverage applies regardless of any prior medical condition. During medical school, premiums are paid in full by the School. The policy provides options for expanding coverage after leaving the School of Medicine, but premiums then become the responsibility of the insured. Sign-up takes place during orientation in the first week of the first year. Representatives from the insurance company are present to explain and answer questions about the policy. They also make themselves available for an exit interview before graduation to discuss continuation of coverage after leaving medical school.

MEDICAL CENTER SECURITY

Yale University has its own police force, and at least one officer patrols the Medical Center twenty-four hours a day. At strategic times, two officers patrol a wider area. The officers are in police uniform, are armed, and have full police powers similar to New Haven police officers. The Yale University Security Programs Department is located at 100 Church Street South. The Central Alarm Station at that location monitors all alarms and cameras in the School of Medicine area. Security personnel have radio and telephone communications with all area police and fire departments. Security officers in the Yale department provide a variety of services including checking IDs; parking enforcement; building patrol; monitoring closed circuit television (CCTV) and alarm systems; providing escorts; providing “lock-out” service for individuals locked out of their room, lab, or office; and offering general assistance to Medical Center personnel and the general public.

The Security Department provides walking and vehicle escorts twenty-four hours a day, seven days a week for the School of Medicine area and central campus. Uniformed security officers radio the Security Central Alarm Station at the beginning and end of each escort and communicate any problems/unsual situations that may occur.

There are over one hundred security officers employed by the University Security Department. Their role is to provide high visibility, and to observe and report potential problems to the security dispatcher and Yale University Police.
University security officers carry two-way radios for communication. Security personnel respond to a variety of situations on campus and notify the proper police agency when necessary. The officers currently wear a white uniform shirt with a Yale security patch on each shoulder, dark blue trousers, and a black tie. Each security officer wears a numbered shield over his or her left breast pocket. The University Security Department can be reached twenty-four hours a day at 203.785.5555.

Yale-New Haven Hospital also has a security force. They check IDs at hospital entry points, patrol the interior and exterior of hospital property, and provide contractual security services at the Air Rights Garage and the Yale School of Nursing.

There are emergency telephones in the Medical Center. Yale emergency telephones are designated by a blue light above the telephone and are for use by anyone to get quick police assistance. All outside doors are locked or attended at all times.

**THE YALE JOURNAL OF BIOLOGY AND MEDICINE**

The *Yale Journal of Biology and Medicine* (YJBM) provides an educational opportunity for students in medicine, public health, nursing, and the biological sciences to gain experience in all aspects of academic publishing. The Journal publishes online four times a year through PubMed Central and receives manuscripts on a wide variety of topics in basic and clinical sciences from authors around the world. Alongside participating faculty members, students review and select articles for publication and have the opportunity to review books and write articles showcasing their research or sharing clinical experiences from Yale and abroad. Student editors are chosen each year from the School of Medicine and the Combined Program in the Biological and Biomedical Sciences. The editorial staff meets monthly. Jeffrey Bender, faculty liaison. Web site, http://medicine.yale.edu/yjbm

**SPECIAL SUPPORT SERVICES**

**Office for Women in Medicine**

The Office for Women in Medicine (OWM) serves as a focal point for a variety of concerns, both general and specific, within the School and the University. The OWM provides women students, house staff, and faculty access to advisers and mentors and facilitates access by students to professional women in an informal setting. Throughout the year, the office sponsors workshops and seminars on professional development and career opportunities for women in medicine and the sciences that address the broader concerns of women and men in the medical community. These programs are designed to provide an area for interchange, to increase the visibility of women in medicine, to introduce women at Yale School of Medicine to a spectrum of role models, to provide access to notable speakers, and to serve as a forum for relevant issues. The very existence of OWM demonstrates Yale’s strong commitment to women and to the creation of a milieu where women at all levels (from beginning students to senior staff and faculty) can develop to full potential. For additional information please visit www.med.yale.edu/owm.

**Office of the Ombudsperson**

The Office of the Ombudsperson is an independent, confidential, neutral, and informal resource to which persons can bring issues with which they are concerned. The
ombudsperson serves as a neutral complaint-handler who attempts to ensure that people are treated fairly and equitably. Any matter in the Yale School of Medicine community may be discussed with the ombudsperson. Discussions are not limited in scope and all are held in strict confidence. The ombudsperson has broad powers of inquiry to resolve conflicts and solve problems through mediation, informal third-party intervention, and shuttle diplomacy. The Office of the Ombudsperson supplements, but does not replace, the existing resources for conflict resolution and fair practice available at the Yale School of Medicine. The ombudsperson follows no prescribed sequence of steps and does not participate in any formal grievance process; the function is to listen, advise, suggest options, make recommendations, and investigate informally with the goal of conflict resolution; to consider all sides of an issue; to remain neutral and impartial; and to protect confidentiality. The only exception to this privilege of confidentiality is where there appears to be imminent risk of serious harm. Discussions with the ombudsperson do not constitute formal notice to the School or University. The contact person is Merle Waxman and the office is located at Sterling Hall of Medicine (SHM L-202), 333 Cedar Street, New Haven, CT 06520; confidential line 203.737.4100.

Office of Multicultural Affairs
The Office of Multicultural Affairs (OMCA) organizes and administers programs and initiatives designed to serve and advance the professional, social, and academic goals of students and faculty underrepresented in medicine. The office is actively involved in the recruitment and retention of students, house staff, fellows, and faculty. Through a number of educational programs, the OMCA works to increase sensitivity to and awareness of issues important to equitable health care in our multicultural society. The office provides outreach support to assist the New Haven school system in educating high school students for future careers in science and health care. The OMCA also administers yearly summer academic enrichment and research programs for college students. The OMCA works in conjunction with such medical student groups as the Student National Medical Association (SNMA), Latino Medical Student Association (LMSA), Asian Pacific American Health Students Association (APAHSA), and Gay Straight Medical Alliance (GSMA). Associate Dean Forrester A. Lee, M.D., heads the office. The contact person is the assistant director, Linda V. Jackson, 367 Cedar Street, Suite 320, New Haven CT 06511; telephone, 203.785.7545; fax, 203.737.5507; e-mail, omca@yale.edu; Web site, http://info.med.yale.edu/omca.

Computing at the School of Medicine
The Cushing/Whitney Medical Library provides computers in the Information Room and the Computer Resources Laboratory (CRL) (www.med.yale.edu/library/services/computing/welcome.html). Both facilities contain Windows and Macintosh computers. All computers have access to the Internet and many have access to productivity software such as Microsoft Office, EndNote, and other tools including desktop publishing software, statistical software (SAS, SPSS, and EPI Info), database management software, common browser plug-ins, and medical education software.
All computers are equipped with CD/DVD writers. All computers also have USB ports for personal USB portable storage devices. The Medical Library offers two scanning stations in the CRL Digital Imaging Center, one for Windows and the other attached to a Macintosh; a third station is located on the first floor in the Information Room. The Mac also includes a variety of graphics applications and Final Cut Pro for video editing and production.

Access to these “productivity” workstations requires a Yale Medical Center NetID to log on. The computers on the main floor are available during library hours. The CRL is open twenty-four hours a day but requires a Yale ID card after library hours.

The Yale Wireless network is available throughout the Medical Library. Library patrons may bring their own laptops to the library and connect to the Yale network via wired Ethernet laptop stations or via the Yale Wireless network. Full details are available at www.med.yale.edu/library/services/computing/laptop.html.

The Circulation Desk lends a variety of electronic devices, such as external USB Zip drives, wireless network PC cards, stereo headphones, three digital cameras, and an HD digital video camera. This equipment may be borrowed by anyone with a valid Yale ID. The Medical Library also provides a laptop computer loaner program for Medical Center students. Sixteen laptops are available for students needing a computer for temporary use.

Computing assistance is available for students by contacting the ITS Help Desk, Monday through Friday from 7 a.m. to 6 p.m. (203.432.9000, or helpdesk@yale.edu). Assistance is also available at the Computing Service Center, Monday through Friday from 9 a.m. to 4 p.m., located on the lower level of the Medical Library.

Computer facilities at the Anlyan Center include five teaching classrooms equipped with eight iMac computers for students and one for instructors. This facility allows small-group teaching and interactive use of online resources such as the virtual microscope. The Gross Anatomy Laboratory at the Anlyan Center is also equipped with thirty-four Mac mini computers to provide online anatomy reference resources to complement traditional dissection.

All students can use their own personal computers at a variety of public, library, or teaching space locations that are equipped with wireless network access. Wireless coverage maps are available at www.yale.edu/its/network/wireless/wirelessmap/medical_campus.html. Student residents in Harkness Dormitory can use their personal computers in the dorm, which is fully equipped with wired and wireless networking. Residents also have access to two computer clusters on the fifth and eighth floors. Both rooms have two Windows XP computers and a laser printer.

Yale has negotiated agreements with computer vendors enabling students to buy computers (IBM, Dell, or Apple), supplies, and software at discounted prices. The University provides online ordering through its e-portal, www.yale.edu/eportal. Students who are interested in buying a personal computer, or who simply want advice and information on personal computers or software packages and how to order them, can consult the staff of the Computing Service Center (www.yale.edu/its/help/cmc.html). Hours are Monday through Friday from 9 a.m. until 4 p.m.

For more information on student computing resources, see www.yale.edu/its/students/med_students.html.
ID Policy
A picture ID is issued when a student registers for the first year. Should the ID be lost, a replacement fee is required and another picture may be taken at the Office of Security and Parking, in SHM CE1B, and another ID processed. This ID should be worn visibly at all times while in the Medical Center.

Card Key Access Policy
Each student receives a picture ID card that opens all perimeter doors to the School of Medicine, as well as some interior connector doors, when he or she registers for the first year. Students in their third year and beyond completing clinical rotations are given ID card access to the Yale-New Haven Hospital card readers. Malfunctioning or accidentally damaged cards are replaced at no charge. Lost, stolen, or deliberately damaged cards are replaced at a fee of $20 for cards with gate and building access capability and $5 for other cards.

Parking
Bicycle parking is available in secured bicycle cages, and keys are available from Yale-New Haven Hospital security. Limited automobile permit parking is available to all Yale faculty, staff, and students in two garages. Off-peak parking (nights and weekends) is also available in designated lots to Yale personnel by application to the Office of Security and Parking.

Shuttle Bus Service
For personnel with a Yale ID, free shuttle bus service is provided on weekdays around the University on a fixed route, to the railroad station, and to various parking lots. In addition, a free shuttle service runs between the VA Connecticut Healthcare System, West Haven, and the School of Medicine on weekdays. There is also a free minibus/night shuttle within designated areas of New Haven seven nights a week from 6 p.m. until 7 a.m.

UNIVERSITY RESOURCES
Two sources of information about the broad range of events at the University are the Yale Bulletin & Calendar (YB&C) newspaper and the Yale Calendar of Events, an interactive calendar that can be found online at http://events.yale.edu/opa. The YB&C, which also features news about Yale people and programs, is available without charge at many locations throughout the campus and is sent via U.S. mail to subscribers; for more information, call 203.432.1316. The paper is also available online at http://opa.yale.edu/bulletin.

The Yale Peabody Museum of Natural History contains collections in anthropology, mineralogy, oceanography, paleontology, and some aspects of geology.

Founded in 1832, when patriot-artist John Trumbull donated more than 100 of his paintings to Yale College, the Yale University Art Gallery is the oldest college art museum in the United States. Today the gallery’s encyclopedic collection numbers more than 185,000 objects ranging in date from ancient times to the present day. These holdings comprise a world-renowned collection of American paintings and decorative arts;
outstanding collections of Greek and Roman art, including the artifacts excavated at the ancient Roman city of Dura-Europos; the Jarves, Griggs, and Rabinowitz collections of early Italian paintings; European, Asian, and African art from diverse cultures, including the recently acquired Charles B. Benenson Collection of African art; art of the ancient Americas; the Société Anonyme Collection of early-twentieth-century European and American art; and Impressionist, modern, and contemporary works. The gallery is currently embarking on the next phase of its expansion project, which includes the renovation of the Swartwout building and Street Hall, the two historic structures adjacent to the recently renovated Kahn building. The gallery is both a collecting and an educational institution, and all activities are aimed at providing an invaluable resource and experience for Yale faculty, staff, and students, as well as for the general public. Learn more from the gallery’s Web site: http://artgallery.yale.edu.

The Yale Center for British Art houses an extraordinary collection of British paintings, sculpture, drawings, and books given to the University by the late Paul Mellon, Yale Class of 1929.

There are more than eighty endowed lecture series held at Yale each year on subjects ranging from anatomy to theology, and including virtually all disciplines.

More than four hundred musical events take place at the University during the academic year. In addition to recitals by graduate and faculty performers, the School of Music presents the Yale Philharmonia, the Chamber Music Society at Yale, the Duke Ellington Jazz Series, the Horowitz Piano Series, New Music New Haven, Yale Opera, and concerts at the Yale Collection of Musical Instruments. Undergraduate organizations include the Yale Concert and Jazz bands, the Yale Glee Club, the Yale Symphony Orchestra, and numerous other singing and instrumental groups. The Department of Music sponsors the Yale Collegium, productions of new music and opera, and undergraduate recitals. The Institute of Sacred Music presents Great Organ Music at Yale, the Yale Camerata, the Yale Schola Cantorum, the Yale Voxtet, and numerous special events.

For theatergoers, Yale and New Haven offer a wide range of dramatic productions at the University Theatre, Yale Repertory Theatre, Yale Cabaret, Long Wharf Theatre, and Shubert Performing Arts Center.

The religious and spiritual resources of Yale University serve all students, faculty, and staff. These resources are coordinated and/or supported through the University Chaplaincy (located on the lower level of Bingham Hall on Old Campus); the Yale University Church at Battell Chapel, an open and affirming church; and Yale Religious Ministry, the on-campus association of clergy and nonordained representatives of various religious faiths. The ministry includes the Chapel of St. Thomas More, the parish church for all Roman Catholic students at the University; the Joseph Slifka Center for Jewish Life at Yale, a religious and cultural center for students of the Jewish faith; Indigo Blue: A Center for Buddhist Life at Yale; several Protestant denominational ministries and non-denominational ministries; and student religious groups such as the Bahá’í Association, the Yale Hindu Council, the Muslim Student Association, and many others. Hours for the Chaplain’s Office during the academic term are Monday through Friday, 8:30 a.m. to 5 p.m., as well as evenings Sunday through Thursday, 5 to 11. Additional information is available at www.yale.edu/chaplain.
The Payne Whitney Gymnasium is one of the most elaborate and extensive indoor athletic facilities in the world. This complex includes the 3,100-seat John J. Lee Amphitheater, the site for many indoor varsity sports contests; the Robert J. H. Kiphuth Exhibition Pool; the Brady Squash Center, a world-class facility with fifteen international-style courts; the Adrian C. Israel Fitness Center, a state-of-the-art exercise and weight-training complex; the Brooks-Dwyer Varsity Strength and Conditioning Center; the Colonel William K. Lanman, Jr. Center, a 30,000-square-foot space for recreational/intramural play and varsity team practice; the Greenberg Brothers Track, an eighth-mile indoor jogging track; the David Paterson Golf Technology Center; and other rooms devoted to fencing, gymnastics, rowing, wrestling, martial arts, general exercise, and dance. Numerous physical education classes in dance (ballet, jazz, modern, and ballroom), martial arts, yoga and pilates, aerobic exercise, and sport skills are offered throughout the year. Yale undergraduates and graduate and professional school students may use the gym at no charge throughout the year. Academic term and summer memberships at reasonable fees are available for faculty, employees, postdoctoral and visiting fellows, alumni, and student spouses.

During the year various recreational opportunities are available at the David S. Ingalls Rink, the McNay Family Sailing Center in Branford, the Yale Outdoor Education Center in East Lyme, the Yale Tennis Complex, and the Golf Course at Yale. Students, faculty, employees, students’ spouses, and guests of the University may participate at each of these venues for a modest fee. Up-to-date information on hours and specific costs can be obtained from the Sport and Recreation Office, 203.432.1431. Please check the Yale Athletics Web site (www.yalebulldogs.com) for more information concerning any of these recreational facilities and programs.

Approximately fifty club sports come under the jurisdiction of the Office of Outdoor Education and Club Sports. Most of the teams are for undergraduates, but a few are available to graduate and professional school students. Yale undergraduates, graduate and professional school students, faculty, staff, and alumni/ae may use the Yale Outdoor Education Center (OEC), which consists of 1,500 acres surrounding a mile-long lake in East Lyme, Connecticut. The facility includes overnight cabins and campsites, a pavilion and dining hall available for group rental, and a waterfront area with supervised swimming, rowboats, canoes, and kayaks. Adjacent to the lake, a shaded picnic grove and gazebo are available to visitors. In another area of the property, hiking trails surround a wildlife marsh. The OEC runs seven days a week from the fourth week of June through Labor Day. For more information, telephone 203.432.2492 or visit the Web page at www.yalebulldogs.com (click on Recreational Choices, then on Outdoor Education Center).

Throughout the year, Yale graduate and professional school students have the opportunity to participate in numerous intramural sports activities. These seasonal, team-oriented activities include volleyball, soccer, and softball in the fall; basketball and volleyball in the winter; softball, soccer, ultimate, and volleyball in the spring; and softball in the summer. With few exceptions, all academic-year graduate-professional student sports activities are scheduled on weekends, and most sports activities are open to competitive, recreational, and coeducational teams. More information is available from the Intramurals Office in Payne Whitney Gymnasium, 203.432.2487, or online at www.yalebulldogs.com.
A GLOBAL UNIVERSITY

In a speech entitled “The Global University,” Yale President Richard C. Levin declared that as Yale enters its fourth century, its goal is to become a truly global university—educating leaders and advancing the frontiers of knowledge not simply for the United States, but for the entire world:

“The globalization of the University is in part an evolutionary development. Yale has drawn students from outside the United States for nearly two centuries, and international issues have been represented in its curriculum for the past hundred years and more. But creating the global university is also a revolutionary development—signaling distinct changes in the substance of teaching and research, the demographic characteristics of students, the scope and breadth of external collaborations, and the engagement of the University with new audiences.”

Yale University’s goals and strategies for internationalization are described in a report entitled “International Framework: Yale’s Agenda for 2009 to 2012,” which is available online at www.world.yale.edu/framework/index.html.

International activity is coordinated by several University-wide organizations in addition to the efforts within the individual schools and programs.

Launched in 2003–2004, the Office of International Affairs supports the international activities of all schools, departments, offices, centers, and organizations at Yale; promotes Yale and its faculty to international audiences; and works to increase the visibility of Yale’s international activities around the globe. See www.yale.edu/ovia.

The Office of International Students and Scholars is a resource on immigration matters and hosts orientation programs and social activities for the University’s international community. See description in this bulletin and www.oiss.yale.edu.

The Whitney and Betty MacMillan Center for International and Area Studies is the University’s principal agency for encouraging and coordinating teaching and research on international affairs, societies, and cultures. See description in this bulletin and www.yale.edu/macmillan.

The Yale Center for the Study of Globalization draws on the intellectual resources of the Yale community, scholars from other universities, and experts from around the world to support teaching and research on the many facets of globalization, and to enrich debate through workshops, conferences, and public programs. See www.ycsg.yale.edu.

The Yale World Fellows Program hosts fifteen emerging leaders from outside the United States each year for an intensive semester of individualized research, weekly seminars, leadership training, and regular interactions with the Yale community. See www.yale.edu/worldfellows.

For additional information, the “Yale and the World” Web site offers a compilation of resources for international students, scholars, and other Yale affiliates interested in the University’s global initiatives. See www.world.yale.edu.

OFFICE OF INTERNATIONAL STUDENTS AND SCHOLARS

The Office of International Students and Scholars (OISS) coordinates services and support for Yale’s international students, faculty, staff, and their dependents. OISS assists
members of the Yale international community with all matters of special concern to them and serves as a source of referral to other University offices and departments. OISS staff provide assistance with employment, immigration, personal and cultural adjustment, and family and financial matters, as well as serve as a source of general information about living at Yale and in New Haven. In addition, as Yale University’s representative for immigration concerns, OISS provides information and assistance to students, staff, and faculty on how to obtain and maintain legal status in the United States, issues the visa documents needed to request entry into the U.S. under Yale’s immigration sponsorship, and processes requests for extensions of authorized periods of stay, school transfers, and employment authorization. All international students and scholars must register with OISS as soon as they arrive at Yale, at which time OISS will provide information about orientation activities for newly arrived students, scholars, and family members. OISS programs, like the international coffee hours, Community Friends hosting program, daily English conversation groups and conversation partners program, U.S. culture workshops, and receptions for newly arrived graduate students, postdoctoral associates, and visiting scholars, provide an opportunity to meet members of Yale’s international community and become acquainted with the many resources of Yale University and New Haven. OISS welcomes volunteers from the Yale community to serve as local hosts for international students and as English conversation partners. Interested individuals should contact OISS at 203.432.2305.

OISS maintains an extensive Web site (www.yale.edu/oiss) with useful information for students and scholars prior to and upon arrival in New Haven. As U.S. immigration regulations are complex and change rather frequently, we urge international students and scholars to visit the office and check the Web site for the most recent updates.

International students, scholars, and their families and partners can connect with OISS and the international community at Yale by subscribing to the following e-mail lists. OISS-L is the OISS electronic newsletter for Yale’s international community. YaleInternational E-Group is an interactive list through which over 3,000 international students and scholars connect to find roommates, rent apartments, sell cars and household goods, find companions, and keep each other informed about events in the area. Spouses and partners of international students and scholars will want to get involved with the organization called International Spouses and Partners at Yale (ISPY), which organizes a variety of programs for the spouse and partner community. To subscribe to any list, send a message to oiss@yale.edu.

Housed in the International Center for Yale Students and Scholars at 421 Temple Street, the Office of International Students and Scholars is open Monday through Friday from 8:30 a.m. to 5 p.m., except Tuesday, when the office is open from 10 a.m. to 5 p.m.; tel. 203.432.2305.

INTERNATIONAL CENTER FOR YALE STUDENTS AND SCHOLARS

The International Center for Yale Students and Scholars, located at 421 Temple Street, across the street from Helen Hadley Hall, offers a central location for programs that both support the international community and promote cross-cultural understanding on
General Information

The center, home to the Office of International Students and Scholars (OISS), provides a welcoming venue for students and scholars who want to peruse resource materials, check their e-mail, and meet up with a friend or colleague. Open until 9 p.m. on weekdays during the academic year, the center also provides office and meeting space for student groups, and a space for events organized by both student groups and University departments. In addition, the center has nine library carrels that can be reserved by academic departments for short-term international visitors. For more information, call 203.432.2305 or visit the center at 421 Temple Street.

RESOURCE OFFICE ON DISABILITIES

The Resource Office on Disabilities facilitates accommodations for undergraduate and graduate and professional school students with disabilities who register with and have appropriate documentation on file in the Resource Office. Early planning is critical. Documentation may be submitted to the Resource Office even though a specific accommodation request is not anticipated at the time of registration. It is recommended that matriculating students in need of disability-related accommodations at Yale University contact the Resource Office by June 4. Special requests for University housing need to be made in the housing application. Returning students must contact the Resource Office at the beginning of each term to arrange for course and exam accommodations.

The Resource Office also provides assistance to students with temporary disabilities. General informational inquiries are welcome from students and members of the Yale community and from the public. The mailing address is Resource Office on Disabilities, Yale University, PO Box 208305, New Haven CT 06520-8305. The Resource Office is located at 35 Broadway (rear entrance), Room 222. Office hours are Monday through Friday, 8:30 a.m. to 4:30 p.m. Voice callers may reach staff at 203.432.2324; fax at 203.432.8250. The Resource Office may also be reached by e-mail (judith.york@yale.edu) or through its Web site (www.yale.edu/rod).
Departments and Sections

This section provides information for all departments and some sections in the School of Medicine. Each listing provides a roster of faculty, fellows, and associates, as well as descriptions of courses.

Courses designated $a$ meet in the fall term only. Courses designated $b$ meet in the spring term only. Courses enclosed in brackets are not offered in the current academic year.

Faculty listings reflect approved appointments effective April 5, 2010.
ANESTHESIOLOGY

Office: TMP 3, 203,785.2802


Associate Professors S. Akhtar, C. A. Brandt (Medical Informatics), K. Cheung (Medical Informatics), S. Garwood, T. M. Halaszynski, K. Haspel, L. N. Marenco (Medical Informatics), B. C. McClain, G. F. McCloskey, R. Ramani, J. J. Schwartz, N. Vadivelu, S. Wang


Instructors G. Badescu, L. H. Kwan, M. Leonova, M. Pollock, D. Rosa, T. Wong

Research Scientist F. G. Sayward (Medical Informatics)

Associate Research Scientists S. J. Frawley, P. G. Mutalik (Medical Informatics), N. Rajeevan, M. Scotch, M. A. Shifman (Medical Informatics), R. Wang, X. Xu

Research Affiliate W. Phoomikham

Clinical Professor J. D. Katz


Assistant Clinical Professors S. I. Assad, C. Ayoub, P. A. Blume (Orthopaedics & Rehabilitation), A. Cherro, M. K. Ghori, J. Kim, Y. F. Shaheen, B. Sherman, L. Wang, K. T. Watson, J. C. Weinberg

Clinical Instructor A. F. Julian

Lecturers A. M. Deshpande (Medical Informatics), B. Kaplan (Medical Informatics), S. LaCoursiere (Medical Informatics), P. Nadkarni (Medical Informatics), P. G. Thomas (Medical Informatics)

Anesthesiology 103, Clinical Clerkship Full-time clinical clerkship for students. Students are assigned throughout the year to Yale-New Haven Hospital for introduction to clinical anesthesiology, including preoperative evaluation of patients, selection of
anesthetic technique, and administration of anesthetics under supervision. Perioperative medicine, airway management, monitoring techniques, clinical pharmacology, and physiology are emphasized. J. Schwartz, S. Akhtar, V. Kurup

**Anesthesiology 104, Advanced Clinical Clerkship**  Four-week elective, full-time clinical clerkship throughout the year (except July and August) for two students. Individualized program of instruction in anesthesia subspecialties, including cardiovascular, neurosurgical, obstetrical, and pediatric anesthesia. J. Schwartz, S. Akhtar, V. Kurup

**Anesthesiology 141, Clinical Research**  One or two students – hours arranged. Participation in ongoing research by departmental faculty involving clinical responses to drugs affecting cardiopulmonary and central nervous systems. The development of individual research projects is also encouraged. D. G. Silverman et al.

**Anesthesiology 142, Basic Research within Anesthesiology**  One or two students – hours arranged. Focuses on cardiovascular tissue engineering and on mechanical characteristics of native and engineered vascular structures. General research projects involve the culturing of implantable engineered arteries and the development of microvasculature in vitro. L. E. Niklason
CELL BIOLOGY

Office: SHM C207, 203.737.5603

Professors M. J. Caplan (Cellular & Molecular Physiology), L. Cooley (Genetics), P. Cresswell (Immunobiology), P. De Camilli, J. E. Galan (Microbial Pathogenesis), F. Gorelick (Medicine), C. Hashimoto, J. D. Jamieson, D. S. Krause (Laboratory Medicine), T. L. Lentz (Emeritus), H. Lin, V. T. Marchesi (Pathology), M. S. Mooseker (Molecular, Cellular & Developmental Biology), M. H. Nathanson (Medicine), T. D. Pollard (Molecular, Cellular & Developmental Biology), J. E. Rothman (Chair), M. Simons (Medicine), E. Ullu (Medicine), S. L. Wolin

Associate Professors K. M. Reinisch, E. Stein (Molecular, Cellular & Developmental Biology), D. K. Toomre, A. M. Vignery (Orthopaedics & Rehabilitation)

Assistant Professors J. Bewersdorf, J. S. Bogan (Medicine), D. Colon-Ramos, M. King, C. P. Lusk, T. Melia, P. A. Takizawa, Y. Zhang

Senior Research Scientist T. L. Lentz


CBIO 502a/b, Molecules to Systems This full-year course is designed to provide medical students with a current and comprehensive review of biologic structure and function at the cellular, tissue, and organ system levels. Areas covered in the first term include replication and transcription of the genome; regulation of the cell cycle and mitosis; protein biosynthesis and membrane targeting; cell motility and the cytoskeleton; signal transduction; nerve and muscle function. The second term covers cell and tissue organization of organ systems including respiratory, renal, gastrointestinal, endocrine, and reproductive systems. Clinical correlation sessions, which illustrate the contributions of cell biology to specific medical problems, are interspersed in the lecture schedule. Histophysiology laboratories provide practical experience with an understanding of exploring cell and tissue structure. The course is offered only to M.D. and M.D./Ph.D. students. This course runs from September to mid-May and is equivalent to three graduate credits. J. Jamieson, T. Lentz, F. Gorelick, P. Takizawa, and staff

CBIO 601a/b, Molecular and Cellular Basis of Human Disease The course emphasizes the connections between diseases and basic science using a lecture and seminar format. It is designed for students who are committed to a career in medical research, those who are considering such a career, or students who wish to explore scientific topics in depth. The first half of the course is organized in four- to five-week blocks that topically parallel CBIO 502a/b. Examples of blocks from past years include “Diseases of protein folding” and “Diseases of ion channels.” Each topic is introduced with a lecture given by the faculty. The lecture is followed by sessions in which students review relevant manuscripts under the supervision of a faculty mentor. The second half of the course focuses on the relationship of basic science to disease processes while emphasizing translational and
clinical research. In addition, sessions are devoted to academic careers and cover subjects such as obtaining an academic position, promotions, and grant writing. The course is open to M.D. and M.D./Ph.D. students who are taking or have taken CBIO 502a/b. Student evaluations are based on attendance, participation in group discussions, formal presentations, and a written review of an NIH proposal. The course runs from September to mid-May and is equivalent to three graduate credits. F. Gorelick, J. Jamieson, and staff

CBIO 602a/MB&B 602a/MCDB 602a, Molecular Cell Biology A comprehensive introduction to the molecular and mechanistic aspects of cell biology for graduate students in all programs. Emphasizes fundamental issues of cellular organization, regulation, biogenesis, and function at the molecular level. S. Wolin, T. Melia, T. Pollard, M. Caplan, C. Crews, P. De Camilli, H. Lin, J. Madri, M. Mooseker, J. Rothman

CBIO 603a/MCDB 603a, Seminar in Molecular Cell Biology A graduate-level seminar course in modern cell biology. The class is devoted to the reading and critical evaluation of classical and current papers. The topics are coordinated with the CBIO 602a lecture schedule. Thus, concurrent or previous enrollment in CBIO 602a is required. S. Wolin, T. Melia, T. Pollard, M. Caplan, C. Crews, P. De Camilli, J. Madri, M. Mooseker, J. Rothman

CBIO 604b, Systems Cell Biology Introduction to the organization and function of cells within complex multicellular systems as encountered in the human body. Covers major tissues and organs as well as the cardiovascular, immune, and nervous systems, with special emphasis on the molecular and cellular bases of developmental processes and human diseases. Lectures supplemented by electronic-based tutorials on the histology of tissues and organs. C. Hashimoto, D. Colón-Ramos, and faculty

CBIO 606b, Advanced Seminars in Cell Biology This seminar course, which meets once weekly, covers advanced topics in cell biology. Each topic is spread over two or three sessions, which start with an introductory overview and are followed by a discussion of key papers led by an expert in the field. Special emphasis is given to application of state-of-the-art imaging techniques to topical areas covering a wide range of contemporary cell biology. K. Reinisch and faculty

CBIO 701b, Illuminating Cellular Function Introduction to the principles and practical methods of live cell imaging. Covers principles of fluorescent microscopy (including genetically encoded probes and physiological indicators), image formation, image detection, and image analysis. Includes hands-on demonstrations of state-of-the-art instrumentation, such as video-rate confocal and multi-photon microscopes. D. Toomre, J. Bewersdorf, and faculty

CBIO 900a/GENE 900a/MCDB 900a, First-Year Introduction to Research and Rotations Lab rotations and grant writing for Molecular Cell Biology, Genetics, and Development track students. F. Slack and faculty

CBIO 901b/GENE 901b/MCDB 901b, First-Year Introduction to Research – Ethics: Scientific Integrity in Biomedical Research Lab rotations and ethics for Molecular Cell Biology, Genetics, and Development track students. V. Horsley
CELLULAR AND MOLECULAR PHYSIOLOGY

Office: SHM B147, 203.785.4041


Associate Professors  A. Bordey (Neurosurgery), M. E. Egan (Pediatrics), M. N. Nitabach, V. A. Pieribone, D. Zenisek

Assistant Professors  R. G. Kibbey (Medicine), S. Tomita, X. Yang (Comparative Medicine), Y. Zhou

Instructor  Q. Leng

Senior Research Scientists  W. K. Chandler, G. H. Giebisch, J. F. Hoffman

Research Scientist  D. P. Zecevic


C&MP 500, From Molecules to Systems: Medical Physiology  This course is open only to first-year medical students. The purpose of the course is to understand complex physiological processes at the level of component molecules, cells, specific tissues, organs, organ systems, and the whole body. Lectures cover human medical physiology in eleven modules: Cell Physiology/Membrane Transport, Nerve, Muscle, Metabolism, Blood, Cardiovascular, Respiratory, Kidney, Gastrointestinal, Endocrine, and Reproduction. Two major themes emerge during the course: (1) the human body employs a multitude of approaches for regulating the environment around its individual cells, and (2) these individual cells perform tasks necessary for sustaining life in the whole organism. E. Boulpaep and staff

C&MP 520a, Current Perspectives in Physiology  This seminar course explores a diverse range of current topics in physiology, emphasizing readings and discussions of recent primary literature. A variety of expert physiologists present topics such as structural biology, membrane transport, signal transduction, sensory systems, and neurophysiology. Instructors guide the discussion regarding the background, the experiments, the methods, and most importantly the impact of relevant research papers. The aim of the course is to understand how physiological approaches integrate the study of organismal function from genes, to systems, to behavior and disease. S. Tomita

C&MP 550a/U/ENAS 550a/U/MCDB 550a/U, Physiological Systems  The course develops a foundation in human physiology by examining the homeostasis of vital parameters
within the body, and the biophysical properties of cells, tissues, and organs. Basic concepts in cell and membrane physiology are synthesized through exploring the function of skeletal, smooth, and cardiac muscle. The physical basis of blood flow, mechanisms of vascular exchange, cardiac performance, and regulation of overall circulatory function are discussed. Respiratory physiology explores the mechanics of ventilation, gas diffusion, and acid-base balance. Renal physiology examines the formation and composition of urine and the regulation of electrolyte, fluid, and acid-base balance. Organs of the digestive system are discussed from the perspective of substrate metabolism and energy balance. Hormonal regulation is applied to metabolic control and to calcium, water, and electrolyte balance. The biology of nerve cells is addressed with emphasis on synaptic transmission and simple neuronal circuits within the central nervous system. The special senses are considered in the framework of sensory transduction. Weekly discussion sections provide a forum for in-depth exploration of topics. E. Boulpaep, W. M. Saltzman

C&MP 560b\(^{U}\)/ENAS 570b\(^{U}\)/MCDB 560b\(^{U}\)/PHAR 560b\(^{U}\), Cellular and Molecular Physiology: Molecular Machines in Human Disease This course focuses on understanding the processes that transfer molecules across membranes at the cellular, molecular, biophysical, and physiological levels. Students learn about the different classes of molecular machines that mediate membrane transport, generate electrical currents, or perform mechanical displacement. Emphasis is placed on the relationship between the molecular structures of membrane proteins and their individual functions. The interactions among transport proteins in determining the physiological behaviors of cells and tissues are also stressed. Molecular motors are introduced and their mechanical relationship to cell function is explored. Students read papers from the scientific literature that establish the connections between mutations in genes encoding membrane proteins and a wide variety of human genetic diseases. E. Boulpaep, F. Sigworth

C&MP 570b, Sensory Physiology This course provides an overview of the mammalian special sensory systems, including molecular and cellular bases of vision, audition, taste, olfaction, and somatosensation. Faculty with focus in those areas lead presentations and discussions on peripheral and central mechanisms. Psychophysical aspects of sensation are introduced. D. Zenisek, J. Santos-Sacchi, Z. J. Zhou

C&MP 600, Medical Physiology Case Conferences Two-term course taught in groups of ten to twelve students by the same group leader(s) throughout the year. Workshop format permits students to apply basic concepts of physiology to clinical syndromes and disease processes. Students are expected to participate actively in a weekly discussion of a clinical case that illustrates principles of human physiology and pathophysiology at the whole-body, system, organ, cellular, or molecular level. Prerequisites: C&MP 550a and permission of the instructor. Credit for full year only. E. Boulpaep and staff

C&MP 610, Medical Research Scholars Program: Mentored Clinical Experience The goals of this course are to introduce MRSP students to aspects of clinically important human diseases. Students explore each disease over three one-and-one-half-hour sessions led by a clinician-scientist who is an expert in the relevant organ system. Students explore two disease processes per term. The first of the three sessions is devoted to a discussion of the clinical presentation, natural history, pathology, epidemiology, treatment,
and prognosis of the disease process. During this session students have the opportunity to view gross or microscopic specimens of diseased tissue in association with members of the Pathology faculty. Students are assigned readings in pathology, pathophysiology, and clinical texts to prepare for the first class session. The second session focuses on translational aspects of the disease process. Students read and present papers relevant to the molecular basis of the disease and cutting-edge approaches to its therapy. In the third session students meet with patients who have experienced the disease and/or visit and explore facilities associated with diagnosis and treatment of the disease process. Prior to the third session students receive guidance as to what they will observe and how to approach the experience; and at the end of the session, the group discusses its thoughts and impressions. Students are expected to prepare for sessions, to participate actively, and to be scrupulously respectful of patients and patient facilities. R. Russell, M. Caplan

**C&MP 620b/NBIO 610b, Fundamentals in Neurophysiology** The course is designed for students who wish to gain a theoretical and practical knowledge of modern neurophysiology. Graduate students specializing in neurophysiology and non-neurophysiology are encouraged to attend, as the course begins at a very basic level and progresses to more complicated topics. Topics include properties of ion channels, firing properties of neurons, synaptic transmission, and neurophysiology methodology. V. Pieribone, F. Sigworth

**C&MP 710b/MB&B 710b4, Electron Cryo-Microscopy for Protein Structure Determination**

**C&MP 750/PSYC 750, Research Topics in the Neurobiology of Learning and Memory** Discussion and analysis of current work on the neurobiological foundations of learning and memory systems in mammals. Informal weekly discussions span several levels of analysis, including molecular and biophysical studies, cellular and systems neurophysiology and neuro-anatomy, and contemporary behavioral neuroscience. T. Brown
CHILD STUDY CENTER

Office: NIHB 208, 203.785.2513


Associate Professors S. J. Berkowitz (Adjunct), H. Blumberg (Psychiatry), K. Chawarska, B. W. Forsyth (Pediatrics), W. S. Gilliam, E. L. Grigorenko, S. M. Horwitz (Public Health), J. Kaufman (Psychiatry), T. J. McMahon (Psychiatry), M. N. Potenza (Psychiatry), L. Sadler (Nursing), L. D. Scanhill (Nursing), M. E. Schwab-Stone, M. W. State, D. Stubbe, J. K. Tebes (Psychiatry), C. C. Weitzman (Pediatrics)

Assistant Professors D. Bridgett (Adjunct), N. L. Close, M. Conceição do Rosário, R. Feldman (Adjunct), H. E. Goff, Y. Kim, P. Luysen (Adjunct), J. C. McPartland, Y. B. Poncin, M. V. Smith (Psychiatry), C. S. Stover, N. E. Suchman (Psychiatry), J. Swain (Adjunct), V. Weersing (Adjunct), M. Yazgan (Adjunct)

Instructor J. Meyer

Research Scientists G. M. Anderson, V. R. Seitz


Research Affiliates C. Cardoso-Martins, C. Dolsten, L. Jarvin


The Child Study Center is a multidisciplinary academic department of the School of Medicine for the study and care of children from birth through adolescence and their families. Child psychiatrists, psychologists, pediatricians, social workers, psychoanalysts, biomedical scientists, nurses, and other professionals collaboratively engage in research and treatment programs on various aspects of children’s growth and development, both normal and deviant. Research programs include child development, psychiatric disorders, social systems and schools, mental retardation, psychosomatic conditions, crisis and trauma, and treatment. Clinical services are provided in general and specialized outpatient clinics, in the Child Psychiatry Inpatient Service in the Children’s Hospital of Yale-New Haven, and in the Child and Adolescent Psychiatry Consultation-Liaison Service. The center provides courses and other academic opportunities for undergraduates and graduate students in various disciplines concerned with children and families, as well as specialized training in child psychiatry, psychology, social work, and clinical research.

**CHLD 122b, Aspects of Child and Adolescent Development in the Practice of Medicine**  CAD explicitly deals with normal development, and specifically emphasizes social, cognitive, and emotional aspects of this lifelong process. It seeks to heighten the student’s awareness of how different phases of development intersect with the clinical practice of medicine. It covers different schools of thought and approaches to developmental processes, leading to a better understanding of (among others) cognitive, language, motor, social, sexual, and interpersonal milestones, from birth through senescence. Since it can be challenging to understand the importance of these normative processes in a clinical vacuum, the course complements the lectures given in the first hour (11 a.m. to noon)
with clinical applications and extensive videotaped examples of that developmental phase in the second (noon to 1 p.m.). This approach provides the main “formula” for the course. First year, spring term, 16 hours. A. Martin and faculty

CHLD 222, Childhood Psychopathology  Students are offered lectures, workshops, and videotapes of children with major or common psychiatric disorders usually first evident during infancy, childhood, and adolescence, including autism, mental retardation, attention deficit hyperactivity disorder, school phobia, learning disabilities, Tourette's Syndrome, obsessive-compulsive disorder, and adolescent disorders. Second year. R. A. King and faculty

CHLD 322, Developmental, Psychiatric, and Psychological Assessment of Infants, Children, and Adolescents  A series of lectures on developmental assessment (DA), psychological testing (P), and the Mental Status Examination (MSE) of children is offered to all students on the Pediatric Clerkship. Students may have the opportunity to observe such evaluations while on the Pediatric Clerkship. Further opportunities to observe DA and P, and to perform mental status examinations of children, are provided during the Child Psychiatry track of the Psychiatry Clerkship. L. Mayes, N. Close, M. Kaplan, and faculty

CHLD 323, The Child Psychiatry Track of the Psychiatry Core Requirement  This track is offered to four students per six-week rotation (three at the Children’s Psychiatric Inpatient Service (CPIS) of Yale-New Haven Hospital, one at the Consultation-Liaison (CL) track of the pediatrics wards at YNHH). The CPIS and CL rotations meet the requirements for the “patient in crisis” and “interface with medicine” requirements of the core psychiatric clerkship of the third year. Both rotations provide extensive opportunities to observe and practice the process used to evaluate, diagnose, and plan the treatment of the child and his or her family. The rotations additionally provide for interview and write-up tutoring experiences, with both child and adult psychiatric patients. The track has three components: (a) a set of core experiences and lectures, (b) a group of optional selective experiences (such as visits to a therapeutic school), and (c) practica and directed readings. The practicum includes interviewing, working up, and writing reports on inpatients under the supervision of a child psychiatry tutor. In addition, each student prepares a written presentation related to an area of interest in child psychiatry. A. Martin, D. Stubbe, Y. Poncin, L. Cardona, and faculty

CHLD 324, Electives in Research  Medical students join with faculty and postdoctoral research fellows in participating in patient-oriented or laboratory-based research projects. Students participate in weekly research seminars and multidisciplinary work groups as well as being directly engaged in some aspect of a new or ongoing research project with a faculty mentor. The elective is full time and has a minimum duration of three months. As of 2006, there is one available slot for a year-long research rotation for fifth-year medical students. J. Leckman, A. Martin, and faculty

CHLD 325/Psychiatry 325, Child Psychiatry Elective, Yale Child Study Center  The aim of this elective is to provide the student with an intensive experience in infant, child, and adolescent psychiatry. The curriculum includes assessments of normal development and
psychopathology in childhood, treatment methods, and research in major disorders of childhood. The elective takes advantage of the wide range of ongoing seminars, conferences, and clinical services in place at the Child Study Center and at Riverview Hospital in Middletown, Connecticut. Teaching methods include seminars, conferences, field observations, ward rounds, and practica selected by the student following consultation with the director of medical studies. Open to fourth-year students throughout the year. A. Martin, D. Stubbe, L. Siegel, and faculty. To enroll in this advanced clinical elective, please contact Dr. Martin directly.
COMPARATIVE MEDICINE

Office: 375 Congress Avenue, LSOG 117, 203.785.2525

Professors  T. L. Horvath (*Chair*), R. O. Jacoby (*Emeritus*), M. W. Sleeman (*Adjunct*)

Associate Professors  J. L. Brandsma, F. R. Homberger (*Adjunct*), J. D. Macy, P. C. Smith, C. J. Zeiss

Assistant Professors  C. J. Booth, Q. Gao, J. A. Goodrich, M. S. Lawrence (*Adjunct*), I. Levy, M. S. Rodeheffer, J. A. Scholz, S. R. Wilson, X. Yang

Senior Research Scientist  R. O. Jacoby

Research Scientists  S. R. Compton, J. M. McGrath, T. P. Nottoli, G. Yao

Associate Research Scientists  E. Borok, Z. Liu
DERMATOLOGY

Office: LCI 501, 203.785.4092

Professors  J. L. Bologna, D. E. Brash (Therapeutic Radiology), I. M. Braverman, P. Cresswell (Immunobiology), R. L. Edelson (Chair), F. M. Foss (Medicine), E. J. Glusac (Pathology), P. W. Heald (Emeritus), D. J. Leffell, J. M. McNiff, L. M. Milstone (Emeritus), J. S. Pober (Immunobiology), R. E. Tigelaar, L. D. Wilson (Therapeutic Radiology)

Associate Professors  S. Z. Aasi, R. J. Antaya, M. W. Bosenberg, S. E. Cowper, M. Girardi, C. A. Herrick, R. Lazova, A. Subtil

Assistant Professors  K. A. Choate, J. N. Choi, A. Galan, S. Imaeda, C. J. Ko, M. M. Tomayko

Instructors  O. R. Colegio, B. A. King, A. E. Reszko

Senior Research Scientists  R. Halaban, L. M. Milstone

Research Scientists  C. L. Berger, A. K. Chakraborty, M. S. Kluger

Associate Research Scientists  D. J. Hanlon, V. Muthusamy, W. Zhang

Research Affiliates  K. O. Duncan, J. M. Pawelek

Clinical Professors  I. Dvoretzky, M. T. Johnson, R. C. Savin, K. L. Watsky


Clinical Instructors  S. Chavel, M. P. Coolidge, D. Correale, J. M. Grant-Kels, M. I. Oestreicher

Lecturer  L. K. Friedlaender

Dermatology 120  Instruction in the evaluation and management of patients with dermatologic disorders in both outpatient and inpatient settings. Emphasis is on common dermatologic problems and cutaneous pathophysiology. Ambulatory patients are seen at Yale Dermatology Associates (2 Church St. South), Yale-New Haven Hospital Primary
DIAGNOSTIC RADIOLOGY

Office: TE-2, 203.785.6938


Instructors  M. Djekeid, S. K. Krishnamoorthi

Senior Research Scientists  R. G. Shulman (Molecular Biophysics & Biochemistry), F. J. Wackers

Research Scientists  F. D’Errico, M. Hampson


Research Affiliates  G. R. Gindi, A. B. Leber, R. Martuzzi, G. Tomasi

Clinical Professors  D. B. Nunez, M. S. Shin, J. D. Slavin


Clinical Instructors  F. L. Lin, M. Tseng

Lecturers  J. Arora, J. Bhawnani, G. J. Conlogue, F. Tokoglu

Diagnostic Radiology 121, Diagnostic Radiology Clerkship  The four-week clerkship introduces the student to the basic principles of all forms of radiologic interpretation. Each day the students rotate through a section of the department of diagnostic imaging, including gastrointestinal, genitourinary, chest, musculoskeletal, neuroradiology, pediatrics, computed tomography, magnetic resonance, nuclear medicine, ultrasound, vascular and interventional radiology, and emergency radiology. In addition to participating in the daily film reading with residents and staff, the students receive an introduction to the role of that section in the diagnosis and management of disease. Self-teaching materials are available in the radiology library. Interactive teaching presentations are also available on the departmental Web site. The students attend the department resident conferences twice daily as well as specific student seminars. Clerkships are offered at Yale-New Haven Hospital. A two-week diagnostic radiology elective is not offered. Prerequisites: none. Full-time: no on-call responsibilities. Limited to six students every four weeks. J. Abraham, A. Haims, and staff

Diagnostic Radiology 134, Clinical Internship in Vascular and Interventional Radiology  This elective is designed as an introduction to vascular and interventional radiology: the use of radiological imaging to guide procedures in various organ systems of the body and the evaluation and management of patients who are candidates for these. In the vascular system, this includes arterial and venous angiography, angioplasty, stenting, embolization for bleeding, tumors (such as uterine fibroids and liver cancer), and vascular malformations, venous reflux management, inferior vena cava filter placement, hemodialysis access management, and placement of a variety of venous access devices. Nonvascular experience includes percutaneous approaches to biliary and urinary track pathology, drainage of abscesses and other fluid collections, and tumor ablation. Students also participate in the interventional radiology clinic and admitting service. Electives last two to four weeks, but additional time can be arranged. This rotation is limited to one student at a time. J. Pollak, J. Aruny, and staff

Diagnostic Radiology 135, Clinical Clerkship in Pediatric Diagnostic Radiology  Introduction to the clinical care of infants, children, and adolescents through the use of integrated diagnostic imaging. Students participate through review of imaging studies with residents and attendings; observation of fluoroscopic, ultrasound, computed tomography (CT), and MRI procedures; and attendance at daily clinical conferences. Students are encouraged to use the teaching file and also to add an interesting case. Elective periods of two to four weeks are possible, times to be arranged, limited to one student per period. R. Goodman and staff
Diagnostic Radiology 137, Clinical Clerkship in Neuroradiology This rotation is designed as an introduction to neuroradiology. The student becomes an integral part of the neuroradiology team which consists of the resident, fellow, and attending physician. A number of teaching conferences are offered including a daily case review session. The student is exposed to the various subsections of neuroradiology including neuro CT, neuro MR, and neuro special procedures, e.g., angiography, myelography, CT biopsy, interventional angiography. J. Abrahams, G. Sze, and staff
SECTION OF EDUCATION

Office of Education: ESH 305, 203.737.4190
Office of Student Research: ESH 308, 203.785.6633

Sect Ed 101, Intensive Pedagogical Experience in Laboratory Research Techniques
Intensive one-week summer course in biomedical research protocols and techniques is open to first-year medical students at Mount Desert Island Biological Laboratory in Bar Harbor, Maine. Four biomedical research topics are the focus of each course: (1) physiological studies of chloride transport in an intact epithelial organ from Squalus acantias; (2) ion channel gene expression in a heterologous expression system (Xenopus oocytes); (3) studies in isolated tubule preparations, including immunocytochemistry of phosphorylated vs. non-phosphorylated co-transporters, tissue processing, confocal microscopy, Western blots, and antibody design; (4) molecular biology of membrane proteins and transporters in shark salt gland, including methods in RNA, cDNA, PCR, cloning, and sequencing. J. Forrest, B. Forbush, P. Aaronson, R. Frizzell, and staff

Sect Ed 102, Organization and Leadership
This course is an introduction to topics in the field of organizational behavior. It is designed to offer participants an opportunity to explore a variety of concepts that relate to the effective and humane management of organizations. Though medicine was once a profession made up primarily of individual practitioners, it is increasingly true that medical professionals, both researchers and clinicians, are now involved in collective endeavors that require coordinated efforts to produce meaningful results. This is the domain of organizational behavior and the subject matter of this course. D. Berg

Sect Ed 103, Applied Principles of Clinical Research (First-Year Seminars)—Office of Student Research
The purpose of this intensive two-week course is to provide an overview of the objectives, research strategies, and methods of conducting patient-oriented research. Topics include research designs, how to ask a research question, data collection, how to write a protocol, bias in studies, qualitative methods, etc. Emphasis is placed on applying concepts to students’ actual research projects. Sessions are workshops that combine didactics and use students’ projects to illuminate concepts. Students must have declared interest in conducting patient-oriented research by May. Consent of instructor required. Two weeks in summer to be announced. Staff

Sect Ed 104, Applied Principles of Clinical Research (Fifth-Year Seminars)—Office of Student Research
The purpose of this intensive two-week course is to provide an overview of the objectives, research strategies, and methods of conducting patient-oriented designs, how to ask a research question, data collection, how to write a protocol, bias in studies, qualitative methods, etc. Emphasis is placed on applying concepts to students’ actual research projects. Sessions are workshops that combine didactics and use students’ projects to illuminate concepts. Students must be funded for one year of research. Consent of instructor required. Two weeks in summer to be announced. Staff

Sect Ed 105, Pre-Clinical Clerkship
This course, extending throughout the first two years, is intended to teach medical students skills in communication, medical history
taking, and physical examination, as well as end-of-life care. The format of the course involves several large group sessions for the purpose of demonstrating or modeling interview techniques and many small group sessions in which students get a chance to observe and practice specific skills. An integral part of the Pre-Clinical Clerkship is the tutorial program in which groups of four students meet with their tutor(s) weekly over a two-year period to practice their newly learned skills on patients in the hospital or clinic.

In the first year, students learn the basics of interviewing patients in formal sessions and the clinical tutorials. Emphasis is placed on a patient-centered approach utilizing standardized patients. Students also learn how to perform a complete physical examination in structured, supervised sessions in which they examine one another. Other activities include practicing their observation skills in an art museum, understanding the skills needed in the care of children, and understanding how to assess geriatric patients, as well as end-of-life care.

During their second year, students learn more sophisticated skills in obtaining a medical history, the components of a proper patient write-up, and the elements of oral patient presentations. Standardized patients are used again for teaching interviewing skills, but also for breast, pelvic, scrotal, and rectal examinations. At the beginning of their second term, students are evaluated on their ability to perform a complete history and physical examination at the Clinical Skills Assessment Program at UConn utilizing their standardized patients.

Students pass the Pre-Clinical Clerkship by attending all the skill-building sessions; demonstrating the ability to perform a complete history and physical exam from memory (at UConn); and having acquired the skills needed on the wards according to their tutor(s). Limited to medical students. M. Bia

Sect Ed 106, Mechanisms of Disease Course: Organs/Systems The purpose of this course is to bridge the preclinical and clinical years and to teach students to use preclinical data in a clinical context. It introduces the pathologic variation of the normal physiologic mechanisms that the students have already learned. This required course is offered in a continuum from September through March for second-year medical students. It consists of thirteen integrated discrete organ-system-based modules that present disease processes from various disciplinary perspectives. The components include pathology, laboratory medicine, diagnostic radiology, preventive medicine, geriatrics, pharmacology, clinical medicine, pediatrics, surgery, and potentially others as indicated by the subject matter.

For each module, representatives from each discipline meet and create a course that presents a comprehensive overview of the organ/system, progressing and building information in a way that allows students to form a basis on which to add knowledge throughout their careers.

Material is taught in a variety of formats including lectures, small group workshops that discuss patient cases, and laboratories. The modules are Hematology; Cardiovascular System; Clinical Neuroscience; Clinical Psychiatry; Endocrine Systems; Reproductive Medicine; Digestive Diseases; Musculo-Skeletal System; Renal/Urology Systems; Respiratory; Ophthalmology; Oncology; and Dermatology. Each module has a module director who is the faculty coordinator. These modules provide excellent preparation
for clinical work on the wards as well as preparation for the second-year USMLE Board Exam, the questions of which use a clinical paradigm. Course is limited to second-year medical students. M. P. DiGiovanna

**Sect Ed 107b, Professional Responsibility** Through a series of lectures and small group case discussions, this course examines physicians’ responsibilities to their patients, their colleagues, their communities, and to society at large. The course examines the nature of the physician–patient relationship and its ethical underpinnings, as well as the legal, social, and economic contexts in which it operates. It focuses on the physician's obligations in several areas, including care for the underserved and vulnerable, respect for patients' privacy and confidentiality, obtaining informed consent for treatment, respecting the right to refuse treatment, respecting reproductive choices, and dealing with issues at the end of life. Finally, the course examines the structure, flaws, and strengths of the U.S. health care system, and the personal and social consequences of recent changes in the way health care is organized and financed in this country. J. S. Hughes

**Sect Ed 108b, Integrative Clinical Medicine** This three-work course is required of fourth-year students in the spring term immediately prior to the internship match. Conceived more than ten years ago as a capstone to four years of medical school training, the ICM course provides a review of some of the knowledge and skills needed for internship and beyond, a forum for a comprehensive and critical evaluation of clinical cases, a chance to review some of the historical and economic factors that inform the practice of medicine, and an opportunity to reflect on the social, ethical, psychological, and even spiritual challenges of a life in medicine. Throughout the three weeks the emphasis is on the interplay among biological, social, and psychological factors that determine the health and illness of our patients and ourselves. Much of the course takes place in small groups of ten to twelve students under the guidance of an experienced clinician facilitator. Several of the small group sessions deal with the management of a clinical case with a view toward preparation for internship, but also including the social context of the case and the impact of economic, family, and societal factors as determinants of illness. In addition there are a number of clinical review sessions, including an ICU “crash course,” several lectures on emergency medicine, a review of empiric antibiotic choices, instruction on how to sign out to colleagues, sessions on how to discuss DNR orders with patients, how to provide adequate pain relief for palliative care, and an intern panel discussion of what life is really like on and off the wards. The course includes a number of optional sessions on “nonbiological” topics throughout the course, including lectures on topics in the history of medicine, how to avoid “burnout,” sessions on leadership and team functioning on the wards, the role of spirituality in medicine, updates on the political economy of the health care system, and the microeconomics of real-world medical practice. Also included are sessions on mistakes in medicine, dealing with difficult patients, end-of-life care, doctor-patient communication, and issues in professionalism and medical ethics. The course concludes with a session on “What you need to know about internship that nobody else will tell you” and finishes just before noon on Match Day. Director: J. S. Hughes
Sect Ed 109, Student Research, Study Design, and Thesis Information—Office of Student Research

This course has two overarching goals. The first is to instill in students an understanding of the value of the Yale student research program and thesis and to provide a primer for success in the thesis. Emphasis is placed on how to choose an excellent thesis project and mentor in laboratory or clinical research, as well as in the areas of epidemiology and public health, international medicine, or medicine and the humanities. Students are instructed on the importance of the research environment, the selection of the best possible up-to-date methods, the importance of issues related to human investigation, and the requirements for HIC approval of protocols for medical student research. The second area of emphasis is to provide students with the basics in designing laboratory and clinical studies, including the use of power calculations, proper control groups, practical biostatistical measurements and their applications for research, and methods for efficient searching of the literature and online databases. Limited to medical students. J. Forrest, faculty, and staff

Sect Ed 110, The Yale Journal of Biology and Medicine (YJBM)

The course provides an educational opportunity for students in medicine, public health, nursing, and the biological sciences to gain experience in all aspects of academic publishing. The Journal publishes online four times a year through PubMed Central and receives manuscripts on a wide variety of topics in basic and clinical sciences from authors around the world. Alongside participating faculty members, students review and select articles for publication and have the opportunity to review books and write articles showcasing their research or sharing clinical experiences from Yale and abroad. Student editors are chosen each year from the School of Medicine and the Combined Program in the Biological and Biomedical Sciences. The editorial staff meets monthly. J. Bender, faculty adviser

Sect Ed 158, Primary Care Clerkship

The Primary Care Clerkship provides students with an opportunity to acquire knowledge and develop clinical and interpersonal skills applicable to outpatient primary care practice. Students are assigned to a community-based office or clinic where they care for patients under supervision by a family practitioner, internist, or pediatrician on Mondays, Wednesdays, and Fridays for one month. On Tuesdays and Thursdays students attend a case-based Workshop Program based on common disorders and core skills relevant to primary care practice. Director: F. Haeseler with a faculty made up of physician educators who share a commitment to practice-based teaching

Sect Ed 158-1, Primary Care Wednesday Evening Clinic

This one-year weekly outpatient clerkship in the Primary Care Center provides experience in the longitudinal care of adults. Students are directly responsible for care of medical problems and preventative care as well as coordination of specialty care for their own patient panel. There are weekly pre-clinic conferences which include Journal Club and primary care case-centered topics presented by students or specialty attendings. Students also become acquainted with the administration of outpatient clinic medicine. The clinic is held every Wednesday evening, 5–9 p.m., except the day before Thanksgiving and between Christmas and New Year’s. It is open to a limited number of fourth-year students and fulfills the primary care requirement provided that students also complete the Primary Care Clerkship Workshop
Program. Students must have completed Hospital Medicine I and II of the Core Medicine Clerkship and Ambulatory Medicine as well as two other third-year Clerkships, preferably Psychiatry and Obstetrics, Gynecology, and Reproductive Sciences. Director: K. P. White; staffed by M. Dillard and rotating attending physicians

**Sect Ed 159, Human Anatomy and Development** This course, designed specifically for first-year medical students, provides an opportunity to dissect or observe all structures of the human body. Lectures, conferences, models, radiology, and Web-based curriculum materials are included. Four students are assigned to each cadaver; students work collaboratively; interpersonal and group process skills are stressed. L. J. Rizzolo and staff

**Sect Ed 160a/b, Special Dissections in Anatomy** A laboratory designed to meet the needs of individual students. Any part of the cadaver may be dissected. Alternatively, students may develop anatomical and teaching skills by helping teach Sect Ed 159. Each student is assigned an anatomist and/or clinical specialist to act as consultant(s). Pre-requisite: Sect Ed 159. Staff
EMERGENCY MEDICINE

Office: 464 Congress Avenue, Suite 360, 203.785.4404

Professors  G. D’Onofrio (Chair), G. L. Larkin, S. M. Powsner (Psychiatry), F. Vaca

Associate Professors  S. L. Bernstein, M. S. Bogucki, D. C. Cone, L. C. Degutis, L. A. Post


Instructors  J. S. Bomann, D. Isenberg, C. H. Lee, R. Van Tonder

Associate Clinical Professor  J. Maisel

Assistant Clinical Professors  C. Rambus, M. J. Werdmann

Clinical Instructors  S. A. Chekijian, S. Kotlyar


Emergency Medicine 103, Clerkship in Emergency Medicine  A mandatory two-week rotation taken during the third year, with the emphasis on learning to care for patients who present to the emergency department with potentially life-threatening chief complaints. Students work shifts in the critical care area, where principles of stabilization and resuscitation are taught under close supervision of an attending Emergency Medicine physician and senior resident. Students are given the opportunity to perform a number of procedures as well, including bedside ultrasound, peripheral line placement, arterial blood gas sampling, and lumbar puncture. Goals of the rotation are to teach students to utilize a range of communication and interpersonal skills to elicit a focused biomedical and psychosocial history, to become competent in the full range of commonly used examination techniques essential to the practice of Emergency Medicine, and to formulate reasonable hypotheses and implement management strategies consistent with the acuity of the illness as well as patient’s preferences. Didactic teaching from Emergency Medicine faculty is done in small groups and includes interactive case conferences, workshops on palliative care and injury prevention, and one-on-one computerized microsimulation sessions with faculty to strengthen Advanced Cardiac Life Support skills. K. Jubanyik

Emergency Medicine 105, Advanced Elective/Subinternship in Emergency Medicine  The one-month elective in Emergency Medicine is a subinternship experience for students desiring an in-depth exposure to the specialty. Students work shifts that parallel those of the attending physicians and are expected to function at the level of an intern. They evaluate patients with undifferentiated complaints, present all patients to the
senior resident and attending, and are provided bedside supervision by both. As in the two-week clerkship in the third year, students are expected to take and present focused histories and physical examinations, but the emphasis is on developing the skills to see a number of patients in parallel fashion, learning to prioritize tasks, and independently developing a management plan. In addition, students attend interactive morning report as well as five hours of didactic conferences each week and receive additional teaching with clinical macrosimulation scenarios. Students also have the option to do the EM elective in a longitudinal fashion, completing at least sixteen shifts over a six-month period. This is an ideal opportunity for students in the lab or completing a combined degree program to maintain clinical skills while away from the wards. K. Jubanyik, J. Sather

Emergency Medicine 107, Integrative Clinical Medicine  ICM is a month-long course offered for graduating students. The emphasis is on preparing the student for internship, and the course offers a practical approach to common complaints. Chief complaints such as chest pain and shortness of breath as well as dysrhythmias are discussed. Presentations, differentials, and efficient, evidence-based work-ups and emergent/urgent treatment are outlined. K. Jubanyik

Emergency Medicine 109, Physician Associate Emergency Medicine Rotation  A four-week introduction to emergency medicine, with emphasis on teaching the importance of creating an appropriate differential diagnosis in patients who present to the ED with routine as well as potentially life-threatening chief complaints. The students work shifts in the main ED as well as in Urgent Care, where they learn the skills necessary to assess and treat patients with undifferentiated complaints and are given the opportunity to perform a number of procedures. Emphasis is on teaching the students to take a history, perform a physical examination, formulate differentials, and implement treatment in the acute, fast-paced setting of the Emergency Department. Students attend morning report as well as the Emergency Medicine resident didactics for five hours each week. J. Sather

Emergency Medicine 112, Ultrasound Elective  A two- or four-week experience that introduces the student to the use of point-of-care diagnostic and procedural ultrasound at the bedside. Educational ultrasounds are performed by the student on emergency department patients using ultrasound equipment in the ED. Attention is paid to image acquisition, machine optimization, and image interpretation. Diagnostic abdominal, pelvic, cardiac, pulmonary, biliary, trauma, and soft-tissue sonography are introduced. In addition, there are opportunities for the student to participate in supervised ultrasound-guided procedures (central and peripheral vascular access, abscess drainage, paracentesis). The bulk of time is spent performing ultrasounds in the emergency department, with one half-day a week spent reviewing recorded examinations. Educational materials are provided. While the focus of this rotation is the sonographic evaluation of the emergency patient, students considering almost any specialty may benefit as clinician-performed ultrasound continues to expand. C. Moore

Emergency Medicine 115, Medical Simulation Course  The medical student clinical simulation course is a mandatory twelve-week course taken during the third year. Each week, students have the opportunity to manage acute emergency medicine and surgical scenarios using a high-fidelity mannequin simulator, the Laerdal SimMan 3-G. Sample
scenarios include acute myocardial infarction, septic shock, and ruptured abdominal aortic aneurysm. A group of four students cares for the patient from the arrival in the Emergency Department to final patient disposition. Students take a history and physical, administer medications, perform procedural interventions to stabilize the patient, consult specialists, discuss plans with the patient, and inform family members of the patient’s status. Procedures include endotracheal intubation, chest tube thoracostomies, and nasogastric tube and urinary catheter insertion. Medical students manage twenty-four scenarios over the twelve-week course, with debriefing sessions led by faculty experts and debriefers from the Departments of Emergency Medicine and Surgery. Team communication, professionalism, and leadership skills are emphasized. The simulation course exposes students to acute emergencies and management strategies not available to them at their level of training on the clinical wards. L. Evans
Epidemiology and Public Health

Office: LEPH 210, 203.785.2867


Instructor  A. R. Adhvaryu

Senior Research Scientists  J. E. Childs (Epidemiology), P. J. Krause (Epidemiology), L. E. Munstermann, N. H. Ruddle (Epidemiology)

Research Scientists  N. Abdala, K. Belanger (Epidemiology), B. Cartmel (Epidemiology), L. Curry (Public Health), J. F. Gent, R. Gueorguieva, B. A. Jones (Epidemiology), D. Schulman-Green (Nursing), N. Sun
The Department of Epidemiology and Public Health, which also functions as the nationally accredited Yale School of Public Health, offers a wide variety of courses across several divisions. Many of these are also available for medical student enrollment. The course catalogue and registration procedures may be obtained by contacting the YSPH Registrar’s Office.
GENETICS

Office: SHM 1308, 203.785.2649


Associate Professors M. Brueckner (Pediatrics), K. Cheung (Medical Informatics), J. H. Cho (Medicine), J. R. Gruen (Pediatrics), M. K. Khokha, V. Reinke, M. W. State (Child Study Center), Z. Sun

Assistant Professors A. J. Giraldez, V. Greco, M. Hammarlund, N. B. Ivanova, T. Kim, P. Li, J. Lim, J. Lu, J. Noonan, I. Park, S. D. Weatherbee, A. Xiao


GENE 500b, Principles of Human Genetics A genetics course taught jointly for graduate students and medical students, covering current knowledge in human genetics as applied to the genetic foundations of health and disease. A. Bale

GENE 603b/IBIO 603b, Teaching in the Science Education Outreach Program (SEOP) TAs, along with volunteers, teach three projects in genetics to seventh-graders in two or three New Haven schools. In addition, TAs take a short course on teaching and serve as science judges. For more details visit www.seop.yale.edu. For teaching credit. P. Kavathas, 203.785.6223

GENE 625a/MB&B 625aU/MCDB 625aU, Basic Concepts of Genetic Analysis The universal principles of genetic analysis in eukaryotes are discussed in lectures. Students also read a small selection of primary papers illustrating the very best of genetic analysis and dissect them in detail in the discussion sections. While other Yale graduate molecular genetics courses emphasize molecular biology, this course focuses on the concepts and logic underlying modern genetic analysis. T. Xu and staff

[GENE 631a/BIS 631a, Topics in Genetic Epidemiology]

[GENE 645a/BIS 645a, Statistical Methods in Human Genetics]

GENE 675, Graduate Student Seminar Students gain experience in preparing and delivering seminars and in discussing presentations by other students. A variety of topics in
molecular, cellular, developmental, and population genetics are covered. Required for all second-year students in Genetics. Graded Sat/Unsat. J. Noonan and staff

[GENE 703b, The Mouse in Biomedical Research  Offered every other year]

GENE 705a/MB&B 705a\(^u\)/MCDB 505a, Molecular Genetics of Prokaryotes  Molecular aspects of the storage, replication, evolution, and expression of genetic material in prokaryotes. Prerequisites: previous or concurrent introductory courses in genetics and biochemistry. N. Grindley

GENE 734a/MB&B 734a/MBIO 734a, Molecular Biology of Animal Viruses  This lecture course covers the molecular biology of animal viruses. Many of the major virus groups infecting vertebrate hosts are discussed in detail. Major topics covered include molecular mechanisms of viral gene regulation and genome replication, cell growth transformation, and virus-cell interactions. The course also highlights the contributions of the study of viruses to our understanding of the biology of eukaryotic cells and the strategies viruses employ to exploit and modify normal cell processes. Prerequisite: prior course work in eukaryotic cell or molecular biology. Suitable for advanced undergraduates and first- and second-year graduate students. R. Means, D. DiMaio, and staff

GENE 743b/MB&B 743b\(^u\)/MCDB 743b, Advanced Eukaryotic Molecular Biology  Selected topics in transcriptional control, regulation of chromatin structure, mRNA processing, mRNA stability, RNA interference, translation, protein degradation, DNA replication, DNA repair, site-specific DNA recombination, somatic hypermutation. Prerequisite: biochemistry or permission of the instructor. M. Hochstrasser, A. Koleske, C. Schlieker, P. Sung

GENE 749a/MB&B 749a\(^u\), Medical Impact of Basic Science  Consideration of examples of recent discoveries in basic science that have elucidated the molecular origins of disease or that have suggested new therapies for disease. Emphasis is placed on the fundamental principles on which these advances rely. Reading is from the primary scientific and medical literature, with emphasis on developing the ability to read this literature critically. Aimed primarily at undergraduates. Prerequisite: biochemistry or permission of the instructor. J. Steitz, M. Hochstrasser, L. Regan, D. Schatz, and staff

GENE 777b/MCDB 677b, Mechanisms of Development  An advanced course on mechanisms of animal and plant development focusing on the genetic specification of cell organization and identity during embryogenesis and somatic differentiation. The use of evolutionarily conserved signaling pathways to carry out developmental decisions in a range of animals is highlighted. Course work includes student participation in critical analysis of primary literature and a research proposal term paper. V. Reinke and staff

GENE 840a and b, Medical Genetics  Clinic Rotation. A clinical rotation offering medical and graduate students the opportunity to participate in the Genetic Consultation Clinic, genetic rounds, consultation rounds, and genetic analysis of clinical diagnostic problems. M. R. Seashore

GENE 900a/CBIO 900a/MCDB 900a, First-Year Introduction to Research and Rotations  Lab rotations and grant writing for Molecular Cell Biology, Genetics, and Development track students. F. Slack and faculty
GENE 901b/CBIO 901b/MCDB 901b, First-Year Introduction to Research—Ethics: Scientific Integrity in Biomedical Research  Lab rotations and ethics for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

GENE 921a and b, Reading Course in Genetics and Molecular Biology  Directed reading with faculty. Term paper required. Prerequisite: permission of Genetics DGS.
HISTORY OF MEDICINE

Office: SHM L132, 203.785.4338

Professors  D. Kevles (History), S. E. Lederer (Adjunct), D. F. Musto (Child Study Center), F. Snowden (History), W. C. Summers (Therapeutic Radiology), J. H. Warner (Chair)

Associate Professor  N. Rogers

Assistant Professors  P. Bertucci (History), M. Espinosa, B. J. Strasser

Lecturer  L. A. Rocha

Yale College and Graduate School courses open to medical students:

HSHM 235b/HIST 234b, Epidemics and Society in the West since 1600  The impact of epidemic diseases such as bubonic plague, cholera, malaria, and AIDS on society, public health, and the medical profession in comparative and international perspective. Popular culture and mass hysteria, the mortality revolution, urban renewal and rebuilding, sanitation, the germ theory of disease, the emergence of scientific medicine, and debates over the biomedical model of disease. F. Snowden

HSHM 414b/CLCV 134b/HIST 217Jb, A History of Ancient Greek Medicine  An introduction to Greek medicine from the fifth century B.C. to the second century A.D., with attention to central concepts, methods, and theories. The relation of scientific theories to clinical practice, to magic, to temple medicine, and to Greek philosophy. V. Grimm

HSHM 442a/HIST 430Ja, Disease, Public Health, and Empire  A study of the ways in which diseases and public health measures have shaped imperial and colonial interactions throughout the world. Themes include epidemics and commercial interactions, conceptions of race and health, ideas of healthy climates, tropical medicine and nongovernmental health institutions, and health inequalities. M. Espinosa

HSHM 444b/HIST 180Jb, Controversies in Human Evolution, 1859 to the Present  Nineteenth- and twentieth-century debates about the causes of human evolution, the phylogenetic history of our species, and the relationship between science and society. Charles Darwin’s theory as it has been expanded and modified since 1859 to organize modern research in genetics, paleoanthropology, eugenics, and molecular systematics. Social applications of evolutionary theory. M. Paton

HSHM 445b/HIST 142Jb/WGSS 453b, Women and Medicine in America from the Colonial Era to the Present  American women from the colonial era to the present as midwives, patients, healers, reformers, revolutionaries, innovators, and entrepreneurs. Ways that women have shaped American health care and medical research. N. Rogers

HSHM 451a/HIST 147Ja/INTS 340a, Science, Arms, and the State  A history of chemical, nuclear, and biological weapons in the twentieth century, focusing on the integration in the United States of national security policy making, scientific research, and military innovation. Topics include consequences of weapons development for the scientific community and the civilian economy, public attitudes toward weapons of mass destruction, and political movements to control such weapons. D. Kevles
HSHM 458a/HIST 410Ja, Technology and Power  The relationship between technological development and political, economic, and social power. Case studies such as colonial engineering projects, railway journeys, aviation in Cold War Afghanistan, and rockets in French Guiana illustrate ways that technology has transformed relations of power around the world. J. Van Vleck

HSHM 462b/HIST 141Jb/THST 394b, Science and Drama  Themes in science, technology, and medicine as they have figured in modern plays written and produced in the United States and Europe. These fictive treatments are compared with scientific and historical reality. Playwrights include Ibsen, Brecht, Capek, Frayn, Stoppard, Molière, and Cassandra Medley. B. Kevles

HSHM 470a and 471b, Directed Reading  Readings directed by members of the faculty in selected topics in the history of science or the history of medicine. Subjects depend on the interests of students and faculty. Weekly conferences; required papers. J. Klein

[HSHM 631bU, The Cultures of Western Medicine: A Historical Introduction]

HSHM 633aU/HIST 916aU, Introduction to the History of Math: Certainty, Uncertainty, and the Infinite  The history of several mathematical topics from antiquity until the present time. Not a mathematics course, but instead an illustration of mathematics as a series of intellectual problems rather than technical accomplishments. W. Summers

HSHM 634aU/AMST 879aU/HIST 914aU, Media and Medicine in Modern America  An exploration of the relationships among medicine, health, and the media in the United States from 1870 through the present. Focus on newspapers, magazines, professional journals, advertising, exhibitions, radio, film, television, and the Internet; and on interactions among researchers, health professions, medical and public health institutions, journalists, advocacy organizations, the state, industry, and the public. Topics include the changing role of the media in shaping conceptions of the body; creating new diseases; influencing health and health policy; crafting the image of the medical profession; informing expectations of medicine and constructions of citizenship; and the medicalization of American life. J. H. Warner, G. Berland

[HSHM 639aU, American Medicine and the Cold War]

HSHM 640aU/HIST 933aU, Molecules, Life, and Disease in the Twentieth Century  The course explores the transformation of the life sciences in the twentieth century. It focuses on the rise of molecular biology and its understanding of life and disease. It shows how and why the molecular vision of life has achieved such a high level of scientific authority and social legitimacy. It emphasizes the relationship of this transformation to broader intellectual, social, cultural, and political change. B. Strasser

HSHM 647bU/HIST 906bU, Medicine and Public Health in Latin America, 1820–2000  Survey of the history of medicine in Latin America from Independence to the present, focusing on the relationships of disease and public health with the construction of state and nation in the countries of the region. Themes include medicine's role in the production and reproduction of race and ethnicity, the treatment of indigenous medical
traditions, the sources and consequences of international disease-control efforts, and persisting inequalities in health and health care. M. Espinosa

[HSHM 670b, Magic Bullets and Wonder Pills]

HSHM 676a/HIST 938a/LAW 20332, The Engineering and Ownership of Life The seminar explores the history of intellectual innovation and intellectual property protection in living matter. Focusing on the United States in world context, it examines arrangements outside the patent system as well as within it. Topics include agriculture, medicine, biotechnology, and law. May be taken as a reading or research course. Open to undergraduates with permission of the instructor. D. Kevles

[HSHM 677b, Genetics, Reproduction, and Society]


HSHM 701a/AMST 878a/HIST 930a, Problems in the History of Medicine and Public Health An examination of the variety of approaches to the social, cultural, and intellectual history of medicine, focusing on the United States. Reading and discussion of the recent scholarly literature on medical cultures, public health, and illness experiences from the early national period through the present. Topics include the role of gender, class, ethnicity, race, religion, and region in the experience of health care and sickness and in the construction of medical knowledge; the interplay between lay and professional understandings of the body; the role of the marketplace in shaping professional identities and patient expectations; citizenship, nationalism, and imperialism; and the visual culture of medicine. J. H. Warner

[HSHM 702b, Problems in the History of Science]

HSHM 706a/HIST 922a, Collecting Nature The course focuses on the role of collections and collectors in the production of natural knowledge between the sixteenth century and the present. From wonder cabinets to electronic databases, collections of natural objects and facts of nature have been crucial to the development of science, medicine, and the state. The course explores court patronage and colonial power, amateur collections and national museums, gift exchange and commodity trade, individual property and collective authorship, secrecy regimes and public disclosures. B. Strasser

[HSHM 710a, Methods for the Social Studies of Science, Technology, and Medicine]

HSHM 721a/HIST 907a, Readings in the History of Science and Medicine in Latin America A close look at recent literature on the history of science and medicine in a Latin American geographical framework. We explore current trends in the history of Latin America including topics such as early exploration, colonial administration, state formation, race relations, economic and social interactions, transnational relations, gender issues, and nationalism, among others. M. Espinosa
HSHM 728a/HIST 903a, The Global Challenge of Malaria  The global challenge of malaria examined in comparative and historical context. The mosquito theory of transmission and other developments in scientific understanding of the disease; World Health Organization strategies to eradicate malaria since 1955; the development of tools such as insecticides, medication, and bed nets; the attempt to create an effective vaccine.
F. Snowden

[HSHM 730a, Disease and Medicine in the Caribbean, 1492–2000]

HSHM 736b/HIST 943b/WGSS 730b, Health Politics, Body Politics A reading seminar on struggles to control, pathologize, and normalize human bodies, with a particular focus on science, medicine, and the state, both in North America and in a broader global health context. topics include colonialism and prostitution; repression and regulation of birth control; the teaching of sex education; the public celebration and denial of sexual difference; politics of sexually transmitted diseases, including HIV/AIDS; public health and legal efforts to define and restrict abortion; the pathologizing and identity politics of transgendered people; and the development and regulation of artificial insemination and other methods of reproductive technology. N. Rogers

[HSHM 740b, The Cultures of American Medicine]

HSHM 743a/HIST 984a, Shell Shock to PTSD: The History of Wartime Mental Illness This research seminar explores the evolving historical consequences of exposure to extreme combat stress, from World War I to the present, and the medical and psychiatric treatments and policies created as a response. Class format includes weekly lectures as well as presentations from historians, care providers, policy makers, and veterans. We encourage interdisciplinary approaches and enrollments. B. Cabanes, D. Aikins

HSHM 914a or b, Research Tutorial I  By arrangement with faculty.

HSHM 915a or b, Research Tutorial II  By arrangement with faculty.

[HSHM 919b/WGSS 732b, Research in Twentieth-Century U.S. Health, Medicine, and the Body]

HSHM 920a or b, Independent Reading  By arrangement with faculty.

HSHM 930a or b, Independent Research  By arrangement with faculty.

In addition to formal course offerings and tutorials offered in the School of Medicine, Yale College, and the Graduate School, activities in the Section of History of Medicine are supplemented by a number of related historical medical programs. Colloquia in the History of Science and Medicine are held fortnightly and are open to the School of Medicine community. The section sponsors an annual Frederic L. Holmes Lecture, and the Department of Surgery sponsors the annual Samuel Clark Harvey Memorial Lecture. The Nathan Smith Club is composed of medical students interested in medical history. The Beaumont Medical Club, founded at Yale in 1920, sponsors six lectures in the History of Medicine during the academic year and annually selects a Beaumont Lecturer and a George Rosen Lecturer in the History of Medicine.
Section faculty are available for M.D. thesis supervision. Information about the History of Medicine M.D. thesis, and a list of recent titles, can be found at http://medicine.yale.edu/humanities/research/theses.aspx.

The section faculty work with the Department of History to offer a Ph.D. program in the History of Science and Medicine. In addition, there is an M.A. program designed particularly for those who plan to combine teaching or scholarship in these fields with a professional career in medicine or the life sciences. For further information concerning admissions and the program itself, consult the Graduate School bulletin.
IMMUNOBIOLOGY

Office: TAC S531, 203.785.3857


**Associate Professors**  T. H. Chi, A. Iwasaki, S. Kaech, E. R. Meffre, W. D. Shlomchik (*Medicine*), B. Su

**Assistant Professor**  C. V. Rothlin

**Research Scientist**  E. E. Eynon


**Lecturers**  J. W. Huleatt, I. Mills

For a complete listing of BBS courses, see http://info.med.yale.edu/bbs.

**IBIO 100a, Immunology for Students of Medicine**  Immunology and its application to clinical situations. 12 hours lecture, 8 hours tutorials


**IBIO 531b, Advanced Immunology**  The historical development and central paradigms of key areas in immunology. The course attempts to develop a clear understanding of how these paradigms were established experimentally. Landmark studies are discussed to determine how the conclusions were obtained and why they were important at the time they were done. Lecture and discussion format; readings of primary research papers and review articles. Prerequisite: IBIO 530a or equivalent. Enrollment limited to fifteen. T. Chi and staff

**IBIO 536b, Advanced Immunology Seminar: Human Clinical Immunology**  E. Meffre, M. Dhodapkar, K. Herold

**IBIO 539a, Advanced Immunology Seminar: Innate Immunity**  R. Medzhitov, C. Rothlin, B. Su

**IBIO 600a, Introduction to Research**  Introduction to the research interests of the faculty. Required for all first-year Immunology students. Pass/Fail. A. Bothwell and staff
IBIO 601b, Fundamentals of Research  Seminar discussing proper conduct of research. Required for first-year Immunobiology students and training grant-funded postdocs. A. Bothwell and staff

IBIO 603b/GENE 603b, Teaching in the Science Education Outreach Program (SEOP)  TAs, along with volunteers, teach three projects in genetics to seventh-graders in two or three New Haven schools. In addition, TAs take a short course on teaching and serve as science judges. For more details visit www.seop.yale.edu. For teaching credit. P. Kavathas, 203.785.6223
INTERNAL MEDICINE

Office: Boardman 110, 203.785.4119


Internal Medicine 103, Core Medicine Clerkship  The Internal Medicine Clerkship comprises three one-month rotations: Hospital Medicine I, Hospital Medicine II, and Ambulatory Medicine. Students are assigned to complete these rotations in a specific order determined by the clerkship directors. During the Hospital Medicine clerkships, students serve as clinical clerks at participating hospitals. Students interview and examine patients, write admission and progress notes, and work with medical teams in the care of patients. Between Hospital Medicine I and Hospital Medicine II, students receive graduated responsibility for patient care. Conferences and teaching rounds are held daily. During the Ambulatory Medicine component of the clerkship, students complete a curriculum including general medicine practice, subspecialty practice, and classroom instruction. Clinical preceptors enable students to have an active part in patient evaluation and treatment commensurate with each student’s experience and capability. Students interview and examine patients, develop differential diagnoses, present to preceptors, discuss treatment with patients, and write visit notes. At all clinical sites, students routinely telephone patients in follow-up. The overall course director is J. McArdle. The director for the ambulatory component is W. N. Kernan, Jr. Clinical precepting and classroom teaching involves over 100 physicians in the Department of Medicine.

Internal Medicine 122, Endocrine Clerkship  The student participates as an active member of the endocrine training program, making daily rounds with the endocrine fellows, residents, and attending physicians. Inpatient consultation, a variety of endocrine clinics, and regularly scheduled metabolism-endocrine conferences are part of the rotation. Full time for three weeks. Offered during elective time. Limited to two students at a time throughout the year. J. Bogan, A. E. Broadus, B. Gulanski, K. Herold, R. Herzog, E. H. Holt, K. L. Insogna, S. Inzucchi, R. Kibbey, B. Lupsa, R. S. Sherwin, G. I. Shulman, J. Wysolmerski

Internal Medicine 123, Renal Clerkship  This clerkship in clinical nephrology offers the student an opportunity for in-depth learning regarding problems in fluid and electrolyte disturbances, acute renal failure, chronic renal failure, and hypertension. Emphasis is placed on problem recognition, pathophysiologic diagnosis, evidence-based clinical judgment, and management based on pathophysiologic principles. The primary activity involves the inpatient consultation service in which the student works up and follows several patients per week, and participates in daily rounds with the attending physicians, postdoctoral fellows, and residents on service. Students participate in the weekly renal conferences. An introduction to hemodialysis, peritoneal dialysis, renal transplantation, and renal biopsy histology is also provided. Students have the opportunity to visit patients on rounds in the hemodialysis units. The clerkship is limited to two students
per hospital; full-time participation is expected. Students should have completed the Internal Medicine clerkship. Rotations can be three- to six-weeks’ duration, although, to derive benefit, at least four weeks is recommended. The elective is offered at both Yale-New Haven Hospital and the VA Connecticut Healthcare System, West Haven, from September through July. A. Abu-Alfa, P. S. Aronson, M. J. Bia, U. Brewster (supervisor), L. Cantley, S. Crowley, G. V. Desir, R. Formica, J. Forrest, A. Peixoto, J. P. Hayslett, S. Huot, R. Mahnensmith, M. Perazella, A. Rastegar, S. Somlo

**Internal Medicine 136, Digestive Disease Conference** Each Friday afternoon from 2 to 3:30 p.m., current patients with gastrointestinal and liver problems of medical, surgical, pediatric, pathologic, or radiologic interest are presented and discussed. This is a practical series of discussions intended to interest anyone from a second-year student to a practitioner. Active participation by all who come is encouraged. Meets in Fitkin. J. Dranoff and Digestive Disease faculty

**Internal Medicine 137, Clinical Gastroenterology Clerkship** The student participates in the daily activities of the Gastroenterology Service. The student is an integral part of the GI team and should plan to spend full time on the elective at Yale-New Haven Hospital or the VA Connecticut Healthcare System, West Haven. Activities include rounds, consultations, conferences at both hospitals, and special procedures, including gastrointestinal endoscopy. Students also participate in outpatient clinics held by the various physicians of the section. This is an opportunity to see a wide variety of gastrointestinal problems and patients, with discussion and review. Offered to one student each at Yale-New Haven Hospital and VA Connecticut Healthcare System. Rotations should be four weeks in duration. Students should have completed the Internal Medicine clerkship. Digestive Disease faculty

**Internal Medicine 141, Cardiology Clerkship** The student participates in the daily activities of the Cardiology Consultation Service, including rounds, consultations, seminars, and conferences dealing with clinical cardiology, nuclear cardiology, echocardiography, cardiac catheterization, and other special procedures. This is a full-time elective requiring a full day’s activities but no night call. The training experience emphasizes the physiologic basis for clinical manifestations of cardiovascular diseases, and their therapy. The elective is limited to three students at Yale-New Haven Hospital and two students at the VA Connecticut Healthcare System, West Haven. The elective lasts a minimum of three weeks; six weeks is recommended if possible. Students must have completed basic Internal Medicine clerkships prior to clerkship. Following an initial Cardiology Clerkship, individual electives can be designed for specific cardiology laboratories or activities such as the coronary care unit, cardiac catheterization laboratory service, echocardiography, nuclear cardiology, electrophysiology, etc. W. P. Batsford, J. R. Bender, J. J. Brennan, M. Burg, H. S. Cabin, B. Cambi, J. Clancy, M. W. Cleman, L. S. Cohen, J. Curtis, F. Giordano, D. Goldstein, H. Haronian, C. Howes, F. Jadbabaie, S. Katz, H. M. Krumholz, R. Lampert, F. A. Lee, L. V. Lee, A. Mani, R. McNamara, S. E. Pfau, M. Remetz, L. Rosenfeld, K. Russell, R. Russell, M. Sadeghi, J. F. Setaro, R. Scandrett, A. J. Sinusas, R. Soufer, A. Vashist, F. J. Wackers, L. H. Young, B. L. Zaret. The individual supervisor is selected from the above participating faculty on a monthly basis.
Internal Medicine 142, Infectious Diseases  The goal of this clerkship is to broaden a student’s experience and diagnostic skills in infectious diseases. Students participate as active members of the consultation service and training program in infectious diseases (Yale-New Haven and VA Connecticut Healthcare System, West Haven, hospitals). This requires a full-time daily commitment of four weeks although shorter clerkships are possible when justified. Activities include daily rounds with both fellows and attending physicians, attendance at all weekly subspecialty conferences, workup of several new consultations each week, formal case presentations, directed reading and library research, and case write-ups for review by the fellow and/or attending physician. Students are encouraged to work closely with fellows and to present cases. Training in clinical microbiology, including bacteriology, virology, and parasitic and fungal infections is conducted daily. Limited to a maximum of two students for each four-week period throughout the year. Outside students accepted through the Office of the Assistant Dean. Completion of all basic clinical clerkships is preferred, though only the basic clinical clerkship in Internal Medicine is required. R. Altice, L. Dembry, E. Fikrig, G. J. Francis, H. Friedland, M. Juthani-Mehta, B. Kazmierczak, M. Kozal, R. Martinello, V. J. Quagliarella, M. Rigsby, A. Shaw, S. Springer, J. Topal, K. Wagner

Internal Medicine 143, Externship in HIV/AIDS  Students desiring an intensive, more advanced experience with the care of HIV-infected persons may spend one month as a subintern on the Donaldson Firm. The Donaldson Firm offers a combined general internal medicine/HIV ward experience. Previously, Donaldson admitted only HIV-infected persons. However, with the advent of highly active antiretroviral therapy and effective opportunistic infection (OI) prophylaxis, the HIV inpatient census has decreased and both HIV-infected and general medical patients are cared for. The firm practices a multidisciplinary HIV care approach. There are two teams that admit HIV-infected patients. Each is comprised of an attending, one resident, one intern, and one third-year medical student. On average, approximately 30 percent of the patients are HIV-infected. Students who elect an externship on Donaldson function as an integral member of one of the two teams. The subintern assumes primary responsibility for his/her patient under the direct supervision of the medical resident. Activities include supervised initial evaluation and daily management of patients with HIV disease; daily rounds with the team; case presentations to the attending physician; and attendance of tri-weekly attending rounds, during which various HIV-related infections and noninfectious problems are discussed. In addition, the student works closely with members from social work, nursing, pastoral care, and discharge planning to better appreciate the multidisciplinary nature of HIV care. Students can arrange to attend one outpatient HIV clinic per week in the Nathan Smith Clinic in order to supplement their inpatient experience with the ambulatory aspects of HIV disease. This elective accommodates one student per month and offers a unique opportunity to participate in comprehensive HIV care in the AIDS Care Program, preferably upon completion of all basic clinical clerkships. A previous medical or surgical subinternship is useful preparation. Outside students are accepted through the Office of the Assistant Dean. Supervising faculty include: F. L. Altice, N. Angoff, D. Bruce, D. Dunne, J. Francis, M. Juthani-Mehta, G. H. Friedland, V. Quagliarella, A. Shaw, S. Springer, J. Topal, M. Villanueva
Internal Medicine 146, Hematology Clerkship  This clerkship provides intensive exposure to clinical hematology by direct participation in the activities of a busy clinical hematology service. Students work up new patients and consultations (at least two patients per week), and attend outpatient clinic on Tuesday mornings, where they may be assigned to see one new patient or two follow-up patients. Students also attend daily hematology ward rounds, bone marrow readings, weekly inpatient and outpatient clinical review, and clinical teaching conferences. Students may limit participation to include only attendance at daily conferences, bone marrow readings, and hematology clinic or consultation service. One or two students for three to six weeks throughout the year. D. Beardsley, M. Dhodapkar, T. P. Duffy, B. G. Forget, S. Halene, P. Marks, P. McPhedran, H. Rinder, B. Smith, M. Strout

Internal Medicine 151/EHS 575a,b, Introduction to Occupational and Environmental Medicine  This course is geared toward those interested in specialty careers in occupational and environmental medicine, environmental health, or preventive medicine. The material covers clinical toxicology, exposure assessment, and the major clinical occupational and environmental diseases. This didactic course meets two hours weekly throughout the year, beginning in September. J. Mobo, M. Russi, and Occupational and Environmental Medicine faculty

Internal Medicine 152, Occupational and Environmental Medicine  This full-time clinical elective emphasizes recognition, management, and prevention of occupational diseases. Approximately five half-days are spent in outpatient clinics; the remainder of the time involves workplace evaluations, clinical follow-up, and didactic teaching sessions. This course is full time, limited to two students per rotation, scheduling year-round. P. Rabinowitz, C. Redlich, M. Russi, J. Sparer, O. Taiwo, J. Mobo, J. Hill

Internal Medicine 155, Advanced Clinical Clerkships (“Sub Internship”)  Students serve as advanced clinical clerks on the floors of one of the following hospitals: Yale-New Haven Hospital; VA Connecticut Healthcare System, West Haven; or Waterbury Hospital, Waterbury. The students function in a role that allows for a high degree of involvement in patient care and permits autonomy in arriving at individual management plans, yet with adequate supervision at all times. Students function either as a pair in place of a first-year resident (intern) or, together with an intern in the event that no other student is available for that rotation. The Sub Interns admit patients to the medical service under the close supervision of an upper-level resident in charge of the service and the attending physician. In addition to daily work rounds and teaching-attending rounds, Sub Interns are expected to participate in Intern Morning Report once a week and at other departmental teaching conferences. The purpose of the course is to provide advanced undergraduate education in inpatient internal medicine beyond that received in the third-year clerkship. The rotation provides the opportunity for students to increase their overall knowledge of and experience with a wide variety of disease processes. In addition, the experience provides the Sub Intern with the opportunity to build upon skills of data gathering acquired during the third-year clerkship, to develop the ability to analyze complex data in logical fashion, and ultimately, based on these analyses, to be able to arrive at clinical decisions and to set priorities. By following a larger number of patients
more closely than during third-year clerkships, students increase their clinical acumen, improve their technical skills, and develop an appropriate level of clinical confidence. The setting allows the development of an increased sense of patient care responsibility from admission to discharge of the patient. Offered throughout the year for periods of four weeks each, to students who have completed their required medical clerkships. C. R. Kapadia, program director

**Internal Medicine 156, Clerkship in Liver Disease**  The student becomes integrated into the team of physicians involved in inpatient and outpatient clinical hepatology. This team normally consists of a faculty attending, one to two postdoctoral fellows in liver disease, and one medical student. The student is expected to see inpatient consultations, discuss the findings with the fellow, and ultimately present the patient to the attending. Additionally, the student sees patients in the Liver Outpatient Clinic three mornings per week. Attendance is expected at weekly liver biopsy, clinical and research conferences, and students may also attend the Liver Transplantation Clinic. This elective represents an intensive experience in hepatology, and during the rotation period the student is introduced to problems in the clinical management of liver disease and also gains a growing appreciation of the role of the liver in systemic disease. This elective is offered at Yale-New Haven Hospital (Drs. Boyer, Dranoff, Garcia-Tsao, Jakab, Lim, Mehal, Nathanson, Sanchez, Schilsky, Strazzabosco, Swenson, and Taddei) or the VA Connecticut Healthcare System (Drs. Chung, Garcia-Tsao, and Imaeda). Three or six weeks, full-time

**Internal Medicine 157, Gastroenterology**  Clinical rounds and clinics with local and Yale affiliated gastroenterologists based at Bridgeport Hospital; conferences on gastrointestinal problems with emphasis on physiologic, radiologic, and pathologic correlation; gastrointestinal radiology conferences; demonstrations of endoscopy (including fiberoptic visualization of the esophagus, stomach, duodenum, colon); other procedures, such as biopsy (liver, esophagus, stomach, small intestine, colon, and rectum), cytology (esophagus, stomach, pancreaticobiliary, and colon), polypectomy, laser, bicap, ERCP, sphincterotomy, sclerotherapy, and PEG. Emphasis on diagnosis and clinical management of gastrointestinal disease of all types. Available to fourth-year students throughout the year at Bridgeport Hospital. G. Abdelsayed


**Internal Medicine 180, Rheumatology**  Students participate in the inpatient Rheumatology consult service at Yale-New Haven Hospital and the VA Connecticut Healthcare System, West Haven. Students attend two general arthritis clinics at the VA Connecticut
Healthcare System, one general arthritis clinic in the Dana 3 clinic at Yale-New Haven, and spend one or two afternoons per week with an attending rheumatologist in a private practice setting on Dana 3. They complete a core curriculum in Rheumatology and fill out pre- and post-rotation evaluation forms. Formal conferences include Rheumatology Grand Rounds, which are held each Wednesday at 8 a.m., and a Case Conference at 9 a.m. Optional conferences include a Rheumatology research-in-progress meeting held Tuesday mornings at 9 a.m. If interested, students may opt to combine Rheumatology and Allergy and Clinical Immunology. Rotation limited to two students for each period of four to six weeks throughout the year. L. Bockenstedt, R. Bucala, J. Craft, J. Evans, L. Fraenkel, I. Kang, S. Malawista, M. Mamula, R. Montgomery, L. Suter and selected members of the part-time community faculty.

Internal Medicine 181, Medical Oncology Clerkship An intensive exposure to medical oncology including diagnosis, staging, evaluation and combined modality therapy, supportive care, and management of problems associated with cancer. Students work under the direct supervision of the attending staff and participate in the care and management of patients on the inpatient service and in the outpatient clinic. They join oncology morning rounds and present patients at the Clinical Oncology Conference. Limited to two students for two to six weeks throughout the calendar year. D. L. Cooper, program director.

Internal Medicine 182/Psychiatry 209, Addictions Medicine Clerkship Offered jointly by the departments of Internal Medicine and Psychiatry. The Yale University School of Medicine offers an elective clinical training experience in Addictions Medicine for interested third- and fourth-year medical students. The primary training sites are the inpatient psychiatric service for dual diagnosis patients at the Connecticut Mental Health Center, the outpatient substance abuse treatment services at the Connecticut Mental Health Center, the APT Foundation Central Medical Unit, and the Primary Care Center at Yale-New Haven Hospital. H. R. Pearsall, P. G. O’Connor. The Addictions Medicine Clerkship is an elective that is scheduled for four weeks. (Slightly longer or shorter training experiences are available by contacting H. R. Pearsall.) Students participate as medical student clerks on the Dual Diagnosis Unit at Connecticut Mental Health Center. This experience is an intensive one, and involves working closely with addicted patients with chronic mental illness. In addition to the inpatient experience, students participate in outpatient treatment under the supervision of clinicians at the Substance Abuse Treatment Unit and the Central Medical Unit, and in the substance abuse assessment and referral services of the Primary Care Center. Students are also invited to participate in the Substance Abuse Research Seminar as well as other educational activities of the Inpatient Division and the Substance Abuse Treatment Unit. For students desiring an intensive focus in one of the three areas of teaching (inpatient dual diagnosis, outpatient substance abuse treatment, or substance treatment in a primary care setting), a schedule can be tailored to provide more time in the setting of interest. H. R. Pearsall, P. G. O’Connor.

Internal Medicine 184, Medical Informatics We explore topics in informatics, such as the definition and scope of the specialty, software engineering, networking and networks, database management systems, information retrieval, the electronic medical record, clinical decision support, and medical decision science. By arrangement with the instructor. R. N. Shiffman.
Internal Medicine 187, Infectious Disease  The elective emphasizes clinical diagnosis and treatment of patients with infectious diseases, hospitalized at the Hospital of Saint Raphael. Students make rounds with infectious disease fellows and with the infectious disease attending physician. Rounds include discussions of many common infectious disease problems, medical microbiology, infection control, the approaches to appropriate use of antibiotics, and the general understanding of treatment guidelines. Students are expected to follow critically ill patients diligently, and may be asked to review articles regarding infections affecting patients followed by the infectious diseases service. J. M. Boyce, M. Virata, M. Golden, A. Fisher

Internal Medicine 188, Renal  The elective is supervised by the Renal Service at the Hospital of St. Raphael. Discussions are held concerning glomerular, tubulo-interstitial, acid-base, and electrolyte disorders. The student participates by performing initial consultations on four or five new inpatients per week, as well as actively participating in the follow-up care of interesting renal, electrolyte, and acid-base problems being followed in the hospital. Student participation in the weekly outpatient Renal Clinic is encouraged. Participation in the outpatient hemodialysis unit and outpatient continuous ambulatory peritoneal dialysis facility is an optional feature of the elective. Formal attending/teaching rounds are held daily for renal fellows, residents, and students participating in the elective. Conferences include biweekly renal conference at the Hospital of St. Raphael, weekly renal conference at Yale-New Haven Hospital, and weekly hemodialysis and continuous ambulatory peritoneal dialysis conferences. The renal fellows at the Hospital of St. Raphael help in the supervision of the students. H. Carey, S. Chang, T. Eisen, F. O. Finkelstein, J. Hansson, S. Shirani, D. Smith

Internal Medicine 189, Pulmonary Critical Care  Supervised clinical rotation in the Medical Intensive Care Unit of the Hospital of St. Raphael. In a multidisciplinary environment, the student shares responsibility for a variety of critically ill patients. Ample opportunity to develop experience and skills in the management of acute respiratory failure, mechanical ventilation, and different forms of hemodynamic shock. A working understanding of cardiopulmonary physiology, arterial blood gases, and acid-base abnormalities in the assessment and management of respiratory disorders is obtained with the direct supervision of the full time pulmonary/critical care attending (Drs. H. Knight and R. Elias) as well as fellowship trainees from the Yale Pulmonary/critical care training program.

Internal Medicine 193, Subinternship in Medicine, Hospital of St. Raphael  This subinternship allows the senior student the opportunity to assume more responsibility for patients and continuity of care. Working as a member of the team, the subintern has major responsibilities in initial assessment, plan formulation, and ongoing inpatient management, and will have the opportunity to provide outpatient hospital follow-up. Full-time medical directors provide supervision, feedback, and training. B. Wu, R. Nardino, and colleagues

Internal Medicine 195, Medical Intensive Care Unit Elective  This rotation exposes highly qualified fourth-year students to the broad spectrum of medical critical care. Students are on call every fourth day with an intern and resident pair, assisting them in
the admission of patients. Students follow patients in the MICU and assist in their care with their intern and resident. It provides the opportunity for participating in the acute management of common life-threatening illnesses such as sepsis, pulmonary edema, DKA, GI bleeding, acute respiratory failure, acute kidney injury, coma, drug overdoses, metabolic acidosis, and hypertensive emergencies. Students are expected to learn about the pathophysiology and treatment of these disorders in this non-subinternship setting. Basic cardiac life support training is expected. All students should be able to demonstrate satisfactory completion of a Medicine II clerkship before taking this elective. Director: S. Honiden

**Internal Medicine 500, Methods of Clinical Research**  This composite course begins with an intensive set of summer classes during July and the first two weeks of August. The course resumes in September and continues throughout the remainder of the academic year, ending in early June. The overall curriculum integrates several distinct components. The summer term contains sessions on statistics, epidemiology, clinical and health services research methods, health economics, and community-based participatory research. The fall term contains more advance statistics and research methods, as well as several sessions on health policy, social and behavioral influences on health, and community-based research. The spring term contains remaining topics in research methods and several sessions on health management. Summer sessions are held four times a week (ten hours); fall sessions are held three times a week (six and one-half hours); spring sessions are held two times a week (five hours). Permission of director required. Director: H. Krumholz

**Internal Medicine 502, Clinical Clerkship, The Connecticut Hospice, Branford, Connecticut**  This fifty-two-bed inpatient program at the nation’s first hospice provides intensive palliative/hospice care for patients with terminal illnesses. The medical, psychosocial, and spiritual needs of these patients and their families are met through the coordinated efforts of an interdisciplinary team of physicians, nurses, social workers, pharmacists, and clergy. When cure is no longer realistic, the goal of therapy becomes symptom control to enable the patient to carry on an alert and pain-free existence. To achieve this goal, a careful physical assessment and noninvasive diagnostic studies can permit the use of focused therapeutic approaches, carefully selected to meet the needs of the individual patient. The specialized palliative/hospice care program emphasizes control of pain and other symptoms with a wide spectrum of both pharmacologic and nonpharmacologic modalities. Students participate in the care and management of hospice inpatients, potentially serving as primary physician for selected patients, under the close supervision of the hospice staff physicians and/or medical director. They participate in morning rounds, family conferences, and weekly Interdisciplinary Team Conferences. A two- or four-week rotation is offered. The four-week rotation is recommended and may include time spent in the home care program, attending team conferences, and making home visits. The home care program encompasses eighty-nine cities and towns throughout Connecticut. The goal of this clerkship is to learn optimal symptom management and, as members of the IDT, to learn to care for patients approaching the end of life and to give support to their families. Contact Louis Gonzalez at 203.315.7502
Internal Medicine 504, Bone Marrow Transplantation  A one-month rotation on the adult bone marrow transplantation unit. Daily inpatient rounds are held. Students are involved in the care of the patients, including the performance of procedures, and attend a daily bone marrow transplant clinic for patient follow up. Weekly clinical conferences are also attended. A suggested reading program is provided. Students are required to present a short discussion about a topic of their choice. D. Cooper

**Humanities in Medicine**

The courses listed below are offered through the Program for Humanities in Medicine for 2010–2011. Further information is available from Dr. Thomas Duffy or Clara Gyorgyey at 203.785.6102. Schedules of courses are flexible. Students who are interested in any (or all) of the following courses, or have other interests that could be addressed through this program, are asked to indicate this on the sign-up sheet. No obligation even if students sign up.

**Internal Medicine 505, Poetry and Medicine**  Hope, courage, devotion, anguish, pain, illness, and death—the substance of all great literature is also fundamental to medicine. Poetry and Medicine, a bi-monthly seminar elective, introduces students to works of poetry, illuminating the ethical, moral, and psychological issues continually confronting their profession. The course helps students develop an understanding of the ways in which interpreting literature enhances their interactions with patients and clarifies some dimensions of their work. Course schedule: Bi-monthly meetings at a mutually determined time. P. Kirwin, T. Duffy

**Internal Medicine 509b, Pregnancy and Neonatal Loss**  For first-year students. This elective centers around what a physician feels when his/her patient dies and how he/she can come to a resolution with regard to this loss. In particular, focus on the expression of feelings through letter writing, poetry, and face-to-face encounters with family members. Introduction to “case histories” based upon the lecturer’s experiences. Course schedule: six meetings at a mutually determined time. Please contact the instructor by e-mail: berman@hygeia.org. M. R. Berman
**INVESTIGATIVE MEDICINE**

Office: ESH, basement 18–19, 203.785.6842


**Associate Professors**  D. A. Fiellin (*Medicine*), J. R. Gruen (*Pediatrics*)

**IMED 625a, Principles of Clinical Research**  The purpose of this intensive two-week course is to provide an overview of the objectives, research strategies, and methods of conducting patient-oriented research. Topics include competing objectives of clinical research, principles of observational studies, principles of clinical trials, principles of meta-analysis, interpretation of diagnostic tests, prognostic studies, causal inference, qualitative research methods, and decision analysis. Sessions generally combine a lecture on the topic with discussion of articles that are distributed in advance of the sessions. Consent of instructor required. Two weeks, July 26–August 6, 2010. E. Shapiro

**IMED 630a, Ethical and Practical Issues in Clinical Investigation**  This term-long course addresses topics that are central to the conduct of clinical investigation, including ethics of clinical investigation, scientific fraud, technology transfer, and interfacing with the pharmaceutical industry. Practical sessions include scientific presentations and teaching, NIH peer review process, journal peer review process, and career development models of academia. The course provides guidelines and a framework for the clinical investigator to obtain funding for, conduct, and present a clinical study. Format consists of didactic presentation followed by discussion. Consent of instructor required. H. Binder

**IMED 635a or b, Directed Reading in Investigative Medicine**  An independent study course for first-year students in the Investigative Medicine program. Topics are chosen by the student, and reading lists are provided by faculty for weekly meetings to discuss articles. Six sessions are required; dates/times by arrangement. Consent of instructor required. J. Craft

**IMED 645a, Introduction to Biostatistics in Clinical Investigation**  The course provides an introduction to statistical concepts and techniques commonly encountered in medical research. Previous course work in statistics or experience with statistical packages is not a requirement. Topics to be discussed include study design, probability, comparing sample means and proportions, survival analysis, and sample size/power calculations. The computer lab incorporates lecture content into practical application by introducing the statistical software package SPSS to describe and analyze data. Consent of instructor required. Two weeks, July 12–23, 2010. H. Binder

**IMED 650a, Seminars in Clinical Investigation**  In this term-long course a range of topics is covered in the format of an interactive seminar. Topics include detailed evaluation of study designs (cohort studies, case-control studies, and clinical trials), development and validation of indices, review of approaches to methodology and issues related to implementation of the methodology (assuring quality of the data, qualitative research methods, estimation of sample size and statistical power), and introduction to finding sources
to fund grant proposals. The format for most of the seminars consists of a didactic presentation followed by intensive discussion of research articles and research protocols. Students lead the discussion in the critical analysis and evaluation of the articles. Attendance and active participation are required. Consent of instructor required. E. Shapiro

IMED 655b, Writing Your First Grant Proposal In this term-long course, students gain intensive, practical experience in evaluating and preparing grants, including introduction to NIH study section format. The course gives new clinical investigators the essential tools to design and to initiate their own proposals for obtaining grants to do research and to develop their own careers. The course is limited to students who plan to submit grant proposals (usually for either a K-23 or a K-08 grant). Attendance and active participation are required. Consent of instructor required. E. Shapiro

IMED 660c, Methods in Clinical Research, Part I E. Shapiro

IMED 661a, Methods in Clinical Research, Part II E. Shapiro

IMED 662b, Methods in Clinical Research, Part III This yearlong course, presented by the Robert Wood Johnson Clinical Scholars Program, presents in depth the methodologies used in patient-oriented research, including methods in biostatistics, clinical epidemiology, health services research, community-based research, and health policy. Consent of instructor required. E. Shapiro

IMED 680b, Topics in Human Investigation The course teaches students about the process through which novel therapeutics are designed, clinically tested, and approved for human use. It is divided into two main components, with the first devoted to moving a chemical agent from the bench to the clinic, and the second to outlining the objectives and methods of conducting clinical trials according to the FDA approval process. The first component describes aspects of structure-based drug design and offers insight into how the drug discovery process is conducted in the pharmaceutical industry. The format includes background lectures with discussions, labs, and computer tutorials. The background lectures include a historical perspective on drug discovery, the current paradigm, and important considerations for future success. The second component of the course provides students with knowledge of the basic tools of clinical investigation and how new drugs are tested in humans. A series of lectures and discussions provide an overview of the objectives, research strategies, and methods of conducting patient-oriented research, with a focus on design of trials to test therapeutics. Each student is required to participate (as an observer) in an HIC review, in addition to active participation in class. Consent of instructor required. J. Craft, K. Anderson
LABORATORY MEDICINE

Office: CB 407, 203.688.2446


Associate Professors  S. M. Campbell, M. E. Hodsdon, C. S. Rinder (*Anesthesiology*), G. E. Stack, Y. Wu

Assistant Professors  J. G. Howe, J. H. McClaskey

Instructors  S. C. Eisenbarth, C. A. Tormey

Senior Research Scientist  S. F. Cotmore

Research Scientists  G. M. Anderson (*Child Study Center*), A. M. Haberman

Associate Research Scientists  L. Devine, T. Eid, C. Keeler, A. Khalil, L. Li, T. S. Murray (*Pediatrics*), P. Zhang

Clinical Professors  B. P. Griffith, R. A. Levine, S. C. Wardlaw

Associate Clinical Professors  P. N. Fiedler (*Pathology*), D. R. Mayo, I. Nash, T. J. Tinghitella

Assistant Clinical Professors  S. R. Gray, I. V. Kaplan, H. Malkus, R. R. Rathbone, C. A. Rauch, N. Shafi, M. Velleca, J. C. West

Clinical Instructor  S. C. Eisenbarth

Lecturers  M. Champion, S. A. Cohen, N. Drew, D. Ferguson, P. E. Marone, R. L. Ross

Laboratory Medicine 102b  This lecture, laboratory, and seminar course deals with scientific use of clinical laboratories (hematology, clinical chemistry, immunology, blood banking) as a basis for the understanding, diagnosis, and treatment of disease. Emphasis is on the selection and interpretation of laboratory tests used in the practice of medicine as well as on acquiring some understanding of the technology used in the clinical laboratories. Lectures and laboratories are integrated into the new organ-based modular system of clinical instruction for second-year medical students. Second-year course.

Laboratory Medicine 123a, Medical Microbiology  This course focuses on both basic microbial pathophysiology and medical microbiology. The course is divided into four sections, consisting of microbial physiology and genetics, bacteriology and mycology, virology, and parasitology. Microbial pathogenesis is taught as it relates to human infectious disease on the cellular and molecular levels. The unique structures, lifestyles, and roles in producing disease of medically important microbes are taught in lecture, laboratory,
and small group settings. Laboratory sessions employ a case-based approach to teach the effective use of laboratory testing in the diagnosis and management of infectious diseases. Microscopy, culture and biochemical, immunological, and molecular techniques are demonstrated and discussed, and simple tests such as Gram stain and rapid antigen tests are performed. Problem-based learning sessions in clinical infectious disease are offered in the last half of the course to provide a bridge from the science of the microbe to the management of infected patients. Second-year course. S. Campbell, M. L. Landry, T. Tinghitella, and associates

**Laboratory Medicine Elective 131** The Department of Laboratory Medicine offers a two- or four-week elective with rotations through the clinical laboratories, including Blood Bank, Therapeutic Apheresis, Clinical Chemistry, Toxicology, Hematology and Coagulation, Flow Cytometry, Immunology, Molecular Diagnostics, Microbiology, and Virology. The student works closely with residents, fellows, attendings, and laboratory staff; works up clinical cases under supervision; and attends morning report, case conference, journal club, clinical rounds, and didactic sessions. The student also has the opportunity to work with the resident on call for at least one weekend day during the elective. The student can rotate through all laboratories, or focus on specific laboratories of interest. The goals of the elective are to learn appropriate usage and interpretation of laboratory tests, and to gain a better understanding of the theoretical, technological, and clinical underpinnings of Laboratory Medicine. This elective is appropriate for students considering a career in Laboratory Medicine or combined Laboratory Medicine and Pathology, but also for all students who will use clinical laboratory testing in their careers. Electives are for two weeks or four weeks, and are limited to one student per session. M. L. Landry and associates

**Laboratory Medicine and Surgical Pathology Elective** The Departments of Laboratory Medicine and Pathology offer a four-week elective that combines two weeks of Laboratory Medicine and two weeks of Surgical Pathology. In Laboratory Medicine, students rotate through the clinical laboratories, including Blood Bank, Therapeutic Apheresis, Clinical Chemistry, Toxicology, Hematology and Coagulation, Flow Cytometry, Immunology, Molecular Diagnostics, Microbiology, and Virology. The student works closely with residents, fellows, attendings, and laboratory staff; works up clinical cases under supervision; and attends conferences and didactic sessions. The goals are to learn appropriate usage and interpretation of laboratory tests, and to gain a better understanding of the theoretical, technological, and clinical underpinnings of Laboratory Medicine.

In Surgical Pathology, students rotate through specialty and general anatomic surgical pathology, frozen section, hematopathology, renal and electron microscopy, molecular diagnostics, cytology, and autopsy. The students work with residents, fellows, attendings, and laboratory staff, participate in work up of clinical cases under supervision, attend tumor boards and other clinical conferences and didactic sessions. The goals are to understand the basic principles of diagnostic anatomic pathology and its role in clinical medicine. This elective is appropriate for students considering a career in Laboratory Medicine and/or Pathology, but also for all students who will use laboratory and pathology tests in their careers.

Electives are for 4 weeks, and are limited to one to two students per session. M. L. Landry and G. K. Haines
Laboratory Medicine Teaching Sessions for Third-Year Medical Students  The purpose of the Laboratory Medicine Teaching Sessions is to introduce third-year students on their clinical rotations to basic concepts of laboratory diagnosis. On the first afternoon of their Internal Medicine rotations at Yale-New Haven Hospital, students visit four laboratories: Blood Bank, Hematology, Chemistry, and Microbiology/Virology. In each laboratory the faculty use clinical cases together with relevant slides, culture plates, or other test data to illustrate the use and interpretation, as well as pitfalls, of laboratory tests. These teaching sessions should also serve to encourage and facilitate communication with the laboratories after the students return to the wards. Third-year course. M.L. Landry and associates
MICROBIAL PATHOGENESIS

Office: 295 Congress Avenue, Room 336B, 203.737.2404

Professors  M. Cappello (Pediatrics), E. Fikrig (Medicine), J. E. Galan (Chair), M. K. Hostetter (Pediatrics), C. R. Roy

Associate Professors  C. Ben Mamoun (Medicine), C. Jacobs-Wagner (Molecular, Cellular & Developmental Biology), B. I. Kazmierczak (Medicine), W. H. Mothes, R. Sutton (Medicine)

Assistant Professors  H. F. Agaisse, P. Kumar (Medicine), B. Lindenbach, J. D. MacMicking

Associate Research Scientists  I. Derre, M. D. Lara-Tejero, S. Ninio, S. Spano, P. D. Uchil

The following courses in the Graduate School of Arts and Sciences are open to medical students with permission of the DGS.

MBIO 547b/EMD 547b, Vaccines: Concepts in Biology  Vaccines are one of the major public health preventive approaches for disease control. However, the underlying biological mechanisms are still being explored, with the goal of designing better and more efficacious vaccines. Vaccine-preventable diseases now include many infectious diseases as well as cancer. The course briefly reviews the immunological basis of immunity to infection and disease. It then explores the basic science underlying vaccine development, current vaccine-preventable diseases, as well as vaccines under development. Prerequisites: immunology and microbiology. D. McMahon-Pratt

MBIO 670a,b, Laboratory Rotation  Rotation in three laboratories. Required for all first-year graduate students. C. Roy

MBIO 680a/EMD 680a, Molecular and Cellular Processes of Parasitic Eukaryotes  An introductory topic-based course in modern parasitology. For each topic there is an introductory lecture followed by a journal club-like discussion session of relevant papers selected from the literature. The course provides an introduction to basic biological concepts of parasitic eukaryotes causing diseases in humans. Topics include strategies used by parasitic eukaryotes to establish infections in the host and approaches to disease control, through either chemotherapy, vaccines, or genomics. In addition, emphasis is placed on evaluating the quality and limitation of scientific publications and developing skills in scientific communication. Prerequisite: permission of the instructor. D. McMahon-Pratt, C. Tschudi

MBIO 685a, Molecular Mechanisms of Microbial Pathogenesis  This interdisciplinary course focuses on current topics related to host-pathogen interactions. Each week a lecture is given on the topic, followed by student presentations of seminal papers in the field. All participants are required to present a paper. H. Agaisse, J. Galán, B. Kazmierczak, P. Kumar, B. Lindenbach, J. MacMicking, W. Mothes, C. Roy
MBIO 700a, Seminal Papers on the Foundations of Modern Microbiology  A required course for Microbiology first- and second-year students; not for credit. Students present and discuss papers describing fundamental discoveries in areas related to microbiology. The goal is to familiarize students with the process of scientific discovery, and with the history of major developments in the field. Topics include important discoveries involving major human pathogens, fundamental processes in molecular biology, and the development of technology that had a major impact in current biomedical research. P. Tattersall

MBIO 701a,b, Research in Progress  All students, beginning in their third year, are required to present their research once a year at the Graduate Student Research in Progress. These presentations are intended to give each student practice in presenting his or her own work before a sympathetic but critical audience and to familiarize the faculty with the research. C. Roy

MBIO 702a,b, Microbiology Seminar Series  All students are required to attend all Microbiology seminars scheduled throughout the academic year. Microbiologists from around the world are invited to describe their research. C. Roy

MBIO 703b, Evasion of Host Defenses by Viruses, Bacteria, and Eukaryotic Parasites  The course represents the second half of MBIO 700a and is a noncredit course taken by first- and second-year Microbiology students. This course is also open to all interested members of the Yale community on a strictly participatory basis. The course is in seminar format, with one student presenting one or two papers each session, on topics chosen with the faculty mentor responsible for that session. The subject matter concerns the strategies employed by viruses, bacteria, or eukaryotic parasites to evade either cell-intrinsic defenses, such as programmed cell death, or responses operating at the level of the organism, such as the adaptive immune response. P. Tattersall

MBIO 734a/MB&B 734a/GENE 734a, Molecular Biology of Animal Viruses  Lecture course with emphasis on mechanisms of viral replication, oncogenic transformation, and virus-host cell interactions. R. Means, D. DiMaio, and staff
Molecular Biophysics and Biochemistry

offices: JWG 304, 203.432.2077; SHM C106, 203.785.4246


Professor (Adjunct) of Research  K. R. Williams

Associate Professors  T. Biederer, E. M. De La Cruz, M. R. Koelle, A. J. Koleske, A. D. Miranker

Assistant Professors  Y. E. Modis, A. E. Rhoades, C. Schlieker, H. Wang, Y. Xiong

Senior Research Scientist  C. M. Joyce

Research Scientists  J. L. Burton, K. Tycowski, V. M. Unger, J. Wang


Lecturers  C. A. Bascom-Slack (Molecular, Cellular & Developmental Biology), L. Boulanger, A. B. Paswase

MB&B 500a/UCMB 500a, Biochemistry  An introduction to the biochemistry of animals, plants, and microorganisms, emphasizing the relations of chemical principles and structure to the evolution and regulation of living systems. L. N. Ornston, R. Breaker, D. Engelman

MB&B 517a2/ENAS 517a/PHYS 517a2, Methods and Logic in Interdisciplinary Research  This half-term IGPPEB class is intended to introduce students to integrated approaches to research. Each session is led by faculty with complementary expertise and discusses papers that use different approaches to the same topic (for example, physical and biological or experiment and theory). Counts as 0.5 credit toward MB&B graduate course requirements. Required for students in IGPPEB. L. Regan, E. De La Cruz, E. Dufresne, T. Emonet, P. Forscher, C. Jacobs-Wagner, M. Levene, S. Mochrie, C. O’Hern, E. Rhoades, C. Wilson
**MB&B 520a, Boot Camp Biology** An intensive introduction to biological nomenclature, systems, processes, and techniques for graduate students with previous backgrounds in non-biological fields including physics, engineering, and computer science who wish to perform graduate research in the biological sciences. Counts as 0.5 credit toward MB&B graduate course requirements. Required for students in IGPPEB. L. Regan, M. Hochstrasser, A. Koleske, C. Schlieker

**MB&B 523a/ENAS 541a/PHYS 523a, Biological Physics** An introduction to the physics of several important biological phenomena, including molecular motors, protein folding, bacterial locomotion, and allosteric regulation. The material and approach are positioned at the interface of the physical and biological sciences. E. Dufresne

**MB&B 545b, Methods and Logic in Molecular Biology** An examination of fundamental concepts in molecular biology through analysis of landmark papers. Development of skills in reading the primary scientific literature and in critical thinking. Open only to MB&B students pursuing the B.S./M.S. degree. A. Koleske, N. Grindley, M. Hochstrasser, D. Söll

**MB&B 550a, Molecular Foundations of Medicine** This course is part of the Molecules to Systems course, which is open only to first-year medical students. An introduction to the major concepts of biochemistry and molecular biology, with emphasis on the human body. Special attention is devoted to how recent advances in basic science contribute to our understanding and treatment of human disease. S. Baserga, M. Solomon, D. Engelman, and staff

**MB&B 591b/ENAS 991b/PHYS 991b, Integrated Workshop** This required course for students in IGPPEB involves hands-on laboratory modules with students working in pairs. A biology student is paired with a physics or engineering student; a computation/theory student is paired with an experimental student. The modules are devised so that a range of skills are acquired, and students learn from each other. S. Mochrie, E. Dufresne, P. Forscher, C. O’Hern, L. Regan

**MB&B 600a, Principles of Biochemistry I** Discussion of the physical, structural, and functional properties of proteins, lipids, and carbohydrates, three major classes of molecules in living organisms. Energy metabolism, hormone signaling, and muscle contraction as examples of complex biological processes whose underlying mechanisms can be understood by identifying and analyzing the molecules responsible for these phenomena. M. Koelle, D. Engelman

**MB&B 601b, Principles of Biochemistry II** A continuation of MB&B 600a that considers the chemistry and metabolism of nucleic acids, the mechanism and regulation of protein and nucleic acid synthesis, and selected topics in macromolecular biochemistry. J. Steitz, C. Schlieker, P. Sung

**MB&B 602a/CBIO 602a/MCDB 602a, Molecular Cell Biology** A comprehensive introduction to the molecular and mechanistic aspects of cell biology for graduate students in all programs. Emphasizes fundamental issues of cellular organization, regulation, biogenesis, and function at the molecular level. S. Wolin, T. Melia, T. Pollard, M. Caplan, C. Crews, P. De Camilli, H. Lin, J. Madri, M. Mooseker, J. Rothman
MB&B 625a/U/GENE 625a/MCDB 625a/U, Basic Concepts of Genetic Analysis  The universal principles of genetic analysis in eukaryotes are discussed in lectures. Students also read a small selection of primary papers illustrating the very best of genetic analysis and dissect them in detail in the discussion sections. While other Yale graduate molecular genetics courses emphasize molecular biology, this course focuses on the concepts and logic underlying modern genetic analysis. T. Xu, M. Koelle, and staff

MB&B 630b/MCDB 630b, Biochemical and Biophysical Approaches in Molecular and Cellular Biology  This graduate course introduces the theory and application of biochemical and biophysical methods to study the structure and function of biological macromolecules. The course considers the basic physical chemistry required in cellular and molecular biology but does not require a previous course in physical chemistry. One class per week is a lecture introducing a topic. The second class is a discussion of one or two research papers utilizing those methods. Does not count for graduate course credit for MB&B graduate students. T. Pollard, E. De La Cruz, and staff

MB&B 635a/U/ENAS 518a, Mathematical Methods in Biophysics  Applied mathematical methods relevant to analysis and interpretation of biophysical and biochemical data, including statistics and error analysis, differential equations, linear algebra, and Fourier transforms. The class covers both analytical and numerical implementations of these topics. Prerequisites: MATH 120a or b and MB&B 600a or equivalents, or permission of the instructors. E. Rhoades, Y. Xiong, C. O’Hern

MB&B 650, Lab Rotation for First-Year Students  Required for all first-year MB&B graduate students. Credit for full year only. M. Solomon

MB&B 676b, Responsible Conduct of Research  Designed for students who are beginning to do scientific research. The course seeks to describe some of the basic features of life in contemporary research and some of the personal and professional issues that researchers encounter in their work. Approximately six sessions, run in a seminar/discussion format. Required for all first-year MB&B graduate students. D. Söll and staff

MB&B 705a/U/GENE 705a/MCDB 505a, Molecular Genetics of Prokaryotes  Molecular aspects of the storage, replication, evolution, and expression of genetic material in prokaryotes. Prerequisites: previous or concurrent introductory courses in genetics and biochemistry. N. Grindley

MB&B 710b/U/C&M 710b, Electron Cryo-Microscopy for Protein Structure Determination

MB&B 720a/U, Macromolecular Structure and Biophysical Analysis  An in-depth analysis of macromolecular structure and its elucidation using modern methods of structural biology and biochemistry. Topics include architectural arrangements of proteins, RNA, and DNA; practical methods in structural analysis; and an introduction to diffraction and NMR. Prerequisites: physical chemistry (may be taken concurrently) and biochemistry. A. Miranker, A. Pyle, Y. Xiong

MB&B 721b/U, Macromolecular Interactions and Dynamic Properties  The course examines dynamic properties of macromolecules, their interactions, catalytic activities, and
methods for analyzing their behavior. Topics include macromolecular folding, binding interfaces, ligand interactions, and the properties of membrane proteins, enzymes, ribozymes, and molecular motors. These areas are presented together with modern methods for analysis of macromolecular associations and dynamic properties. Prerequisites: biochemistry, physical chemistry, and MB&B 720a or permission of the instructor. A. Pyle, D. Engelman, E. Rhoades, H. Wang

**MB&B 730a, Methods and Logic in Molecular Biology** The course examines fundamental concepts in molecular biology through intense critical analysis of the primary literature. The objective is to develop primary literature reading and critical thinking skills. Required of and open only to first-year graduate students in MB&B. M. Solomon, A. Koleske, L. Regan

**MB&B 734a/MBIO 734a/GENE 734a, Molecular Biology of Animal Viruses** Lecture course with emphasis on mechanisms of viral replication, oncogenic transformation, and viral–host cell interactions. R. Means, D. DiMaio, and staff

**MB&B 743b/GENE 743b/MCDB 743b, Advanced Eukaryotic Molecular Biology** Selected topics in transcriptional control, regulation of chromatin structure, mRNA processing, mRNA stability, RNA interference, translation, protein degradation, DNA replication, DNA repair, site-specific DNA recombination, somatic hypermutation. Prerequisite: biochemistry or permission of the instructor. M. Hochstrasser, A. Koleske, C. Schlieker, P. Sung

**MB&B 749a/GENE 749a, Medical Impact of Basic Science** Consideration of examples of recent discoveries in basic science that have elucidated the molecular origins of disease or that have suggested new therapies for disease. Emphasis is placed on the fundamental principles on which these advances rely. Reading is from the primary scientific and medical literature, with emphasis on developing the ability to read this literature critically. Aimed primarily at undergraduates. Prerequisite: biochemistry or permission of the instructor. May not be taken by MB&B B.S./MS. students for graduate course credit. J. Steitz, M. Hochstrasser, I. G. Miller, L. Regan, D. Schatz, and staff

**[MB&B 750a2, Biological Membranes]**

**MB&B 752b/CF&B 752b/CPSC 752b/MCDB 752b, Bioinformatics: Practical Application of Simulation and Data Mining** Bioinformatics encompasses the analysis of gene sequences, macromolecular structures, and functional genomics data on a large scale. It represents a major practical application for modern techniques in data mining and simulation. Specific topics to be covered include sequence alignment, large-scale processing, next-generation sequencing data, comparative genomics, phylogenetics, biological database design, geometric analysis of protein structure, molecular–dynamics simulation, biological networks, normalization of microarray data, mining of functional genomics data sets, and machine learning approaches for data integration. Prerequisites: MB&B 301b and MATH 115a or b, or permission of the instructor. M. Gerstein

**MB&B 760b3, Principles of Macromolecular Crystallography** Rigorous introduction to the principles of macromolecular crystallography, aimed at students who are planning
to carry out structural studies involving X-ray crystallography or who want to obtain in-depth knowledge for critical analysis of published crystal structures. Counts as 0.5 credit toward MB&B graduate course requirements. Prerequisites: physical chemistry and biochemistry. T. Steitz

**MB&B 761b4, X-ray Crystallography Workshop**  This laboratory course provides hands-on training in the practical aspects of macromolecular structure determination by X-ray crystallography. Topics include data collection, data reduction, phasing by multi-wavelength anomalous diffraction and molecular replacement, solvent flattening, non-crystallographic symmetry averaging, electron density interpretation, model building, structure refinement, and structure validation. The course includes training in the use of computer programs used to perform these calculations. Counts as 0.5 credit toward MB&B graduate course requirements. Prerequisites: MB&B 760b3 and a working exposure to the Unix operating system. Y. Xiong and staff

**MB&B 800a, Advanced Topics in Molecular Medicine**  The seminar, which covers topics in the molecular mechanisms of disease, illustrates timely issues in areas such as protein chemistry and enzymology, intermediary metabolism, nucleic acid biochemistry, gene expression, and virology. M.D. and M.D./Ph.D. students only. Prerequisite: biochemistry (may be taken concurrently). S. Baserga, W. Konigsberg, and staff

**MB&B 900a or 901b, Reading Course in Biophysics**  Directed reading course in biophysics. Term paper required. By arrangement with faculty. Open only to graduate students in MB&B. Please see syllabus for additional requirements. M. Solomon

**MB&B 902a or 903b, Reading Course in Molecular Genetics**  Directed reading course in molecular genetics. Term paper required. By arrangement with faculty. Open only to graduate students in MB&B. Please see syllabus for additional requirements. M. Solomon

**MB&B 904a or 905b, Reading Course in Biochemistry**  Directed reading course in biochemistry. Term paper required. By arrangement with faculty. Open only to graduate students in MB&B. Please see syllabus for additional requirements. M. Solomon
NEUROBIOLOGY

Office: SHM C303, 203.785.4323

Professors  A. F. Arnsten, B. S. Bunney (Psychiatry), N. Daw (Ophthalmology & Visual Science), P. De Camilli (Cell Biology), N. C. deLanerolle (Neurosurgery), J. E. Gelernter (Psychiatry), C. A. Greer (Neurosurgery), T. L. Horvath (Comparative Medicine), J. D. Kocsis (Neurology), R. H. LaMotte (Anesthesiology), C. Leranth (Obstetrics, Gynecology & Reproductive Sciences), P. J. Lombroso (Child Study Center), D. A. McCormick, G. D. Pearlson (Psychiatry), M. Picciotto (Psychiatry), P. Rakic (Chair), J. Santos-Sacchi (Surgery), I. R. Schwartz (Surgery), G. M. Shepherd, S. M. Strittmatter (Neurology), C. H. van Dyck (Psychiatry), X. Wang, S. G. Waxman (Neurology)

Associate Professors  M. Alreja (Psychiatry), H. Blumenfeld (Neurology), H. Blumenfeld (Neurology), C. J. Bruce, M. C. Crair, S. Diano (Obstetrics, Gynecology & Reproductive Sciences), M. Gunel (Neurosurgery), A. J. Koleske (Molecular Biophysics & Biochemistry), M. Laubach, D. Lee, V. A. Pieribone (Cellular & Molecular Physiology), M. L. Schwartz, N. Sestan, F. M. Vaccarino (Child Study Center), M. F. Yeckel

Assistant Professors  S. A. Castner (Psychiatry), E. A. Jonas (Medicine), C. Li (Psychiatry), A. Louvi (Neurosurgery), J. A. Mazer, D. S. Navaratnam (Neurology), J. V. Verhagen, G. V. Williams (Psychiatry)

Senior Research Scientist  N. Carnevale

Research Scientist  L. D. Selemon


Research Affiliates  W. R. Chen, C. Draeger

NBIO 500b/NSCI 510b, Structural and Functional Organization of the Human Nervous System  An integrative overview of the structure and function of the human brain as it pertains to major neurological and psychiatric disorders. Neuroanatomy, neurophysiology, and clinical correlations are interrelated to provide essential background in the neurosciences. Lectures in neurocytology and neuroanatomy survey neuronal organization in the human brain, with emphasis on long fiber tracts related to clinical neurology. Weekly three-hour laboratory sessions devoted to neuroanatomy in which students dissect the human brain and examine histological sections in close collaboration with faculty members. Lectures in neurophysiology cover various aspects of neural function at the cellular level, with a strong emphasis on the mammalian nervous system. Clinical correlations consist of five sessions given by one or two faculty members representing both basic and clinical sciences. These sessions relate neurological symptoms to cellular processes in various diseases of the brain. Variable class schedule; contact course instructors. This course is offered to graduate and M.D./Ph.D. students only and cannot be audited. M. Schwartz, P. Rakic, and staff
NBIO 501a/NSCI 501a, Principles of Neuroscience  General neuroscience seminar: lectures, readings, and discussion of selected topics in neuroscience. Emphasis is on how approaches at the molecular, cellular, physiological, and organismal levels can lead to understanding of neuronal and brain function. M. Yeckel

NBIO 502a, Structure and Function of Neocortex  The course covers anatomical, biochemical, and physiological organization of selected sensory, motor, and association regions of cortex. Sample topics discussed include development, evolution of multiple representations, columnar organization, and plasticity of neocortex. Hours arranged with individual instructors. Faculty

[NBIO 507b/NSCI 507b, Cellular and Molecular Mechanisms of Neurological Disease  Next offered spring 2012]

NBIO 509b/NSCI 539b, Synaptic Organization of the Nervous System  An integrative introduction to the principles underlying the organization of neural systems. The focus is on the best-understood systems, including spinal cord, olfactory bulb, retina, cerebellum, thalamus, basal ganglia, and cerebral cortex. Students integrate experimental findings from anatomy, electrophysiology, and neuropharmacology with computational models at the cellular and circuit level to understand the neural basis of behavior. G. Shepherd, A. Williamson, M. Hines

NBIO 510a, Introduction to Methods in Cellular and Molecular Neurobiology  First-hand insight into various techniques and approaches used in neuroscience. Light microscopic techniques include various metallic impregnation methods, autoradiography, anterograde and retrograde axonal transport methods, hybridoma and recombined DNA technology, deoxyglucose metabolic method, fluorescent and immunocytochemical methods. Electron microscopy encompasses transmission, electronmicroscopic autoradiography, and immuno-peroxidase methodology. Choice of techniques and hours to be arranged with individual faculty or staff members of the Department of Neurobiology. Faculty

NBIO 511, Introduction to Techniques Used in Electrophysiological Analysis at the Cellular Level  Includes practical training in in vivo and in vitro nervous system preparations, extracellular and intracellular recordings, sensory stimulation, dye injections, and selected neuropharmacological procedures. Choice of techniques and hours to be arranged with individual faculty of the Department of Neurobiology. Faculty

NBIO 524a/NSCI 514a, Neurodevelopment and Neuropsychiatric Disorders  The course discusses basic concepts concerning the development of the central nervous system. We focus on the mechanisms that regulate progenitor cell proliferation, the acquisition of regional and cellular identity, neuronal migration, axon guidance, cell death, and activity-dependent mechanisms of neural circuit formation. Information drawn from these basic developmental mechanisms is used to discuss the newest emerging ideas about the pathogenesis of neuropsychiatric disorders such as autism, Tourette’s syndrome, depression, and other affective disorders. F. Vaccarino, M. Crair

[ NBIO 535b/NSCI 535b, History of Modern Neuroscience ]
[NBIO 570a, Cellular and Network Dynamics of Sensory and Motor Functions]

[NBIO 590a, Sensory Neuroethology: Bats and Owls, Electric Fish, and Beyond]

[NBIO 595a/NSCI 595a, Seminar in Visuomotor Neurophysiology]

**NBIO 596a/NSCI 596a, Seminar in Neurophysiology of Decision Making**  The course involves the critical reading and discussion of both historical and contemporary papers on the neurobiology of decision making. Although it covers some key papers in behavioral economics, reinforcement learning, and neuroeconomics, the major emphasis is on the studies directed at understanding the mechanisms of decision making using neurobiological methods, including single-neuron recording and functional neuroimaging. D. Lee, J. Mazer

**NBIO 602, Topics in Cortical Development and Evolution**  This advanced tutorial course involves extensive reading, discussion, and pilot experiments on the topic. P. Rakic

**NBIO 610b/C&MP 620b, Fundamentals in Neurophysiology**  The course is designed for students who wish to gain a theoretical and practical knowledge of modern neurophysiology. Graduate students specializing in neurophysiology and non-neurophysiology are encouraged to attend, as the course begins at a very basic level and progresses to more complicated topics. Topics include properties of ion channels, firing properties of neurons, synaptic transmission, and neurophysiology methodology. V. Pieribone, F. Sigworth

**NBIO 720a/MCDB 720a/NSCI 720a, Neurobiology**  Examination of the excitability of the nerve cell membrane provides a starting point for the study of molecular, cellular, and intracellular mechanisms underlying the generation and control of behavior. H. Keshishian, P. Forscher
NEUROLOGY

Office: LCI 708, 203.785.5947


Associate Professors  J. M. Baehring (Neurosurgery), H. Blumenfeld, R. B. Duckrow, J. M. Goldstein, J. W. Pan (Neurosurgery), H. S. Patwa, O. A. Petroff

Assistant Professors  S. S. Chandra, S. Novella, J. Schindler, H. Tokuno


Senior Research Scientist  R. H. Mattson

Research Scientists  J. A. Black, S. D. Dib-Hajj, D. S. Navaratnam


Associate Clinical Professors  R. C. Delaney, J. C. McVeety, N. S. Werdiger, R. S. Young (Pediatrics)


Clinical Instructors  M. J. Hasbani, A. S. Mednick, H. Sami, J. Yim

Lecturers  L. Bangalore, J. L. Gross, S. Kadimi, P. J. McAllister, A. Quan Hong, K. C. Siegel, D. M. Zagar

Neurology 102, Clinical Neuroscience Core Clerkship  The primary goal of this four-week clinical clerkship is to provide students with a fundamental approach to the nervous system. Specifically, this means the history, examination, diagnostic imaging, and treatment in the context of specific patients. Additionally, there is a series of lectures covering the broad range of conditions students are likely to encounter, such as trauma, stroke, infections, tumors, dementias, and seizures. Students take call with neurology residents once a week at Yale-New Haven Hospital; students assigned to neurosurgery take call with the residents on that service. After having given input on their preferences, students are placed on one of the following services for their clerkships: adult inpatient neurology,
adult neurology consultation service, pediatric neurology, neurosurgery. All rotations are done at YNHH, the VA Connecticut Healthcare System, West Haven, or St. Raphael's Hospital. H. Patwa, L. Ment, C. Duncan, H. Blumenfeld

**Neurology 103, Clinical Neurology Elective** Assignments for the clinical neurology elective are to the YNHH neurology consultation service, a rotation consisting of all outpatient clinics; or to the YNHH Inpatient Neurology Service. Four-week blocks coinciding with clerkship dates are preferred, but scheduling of electives is somewhat flexible. Students are able to request a choice, but assignment is made to assure that there is a balanced distribution between students in the required Neuroscience Clerkship and those doing electives, in order to allow an optimal learning experience for all students. Students work directly with attending faculty, chief residents, and junior residents as well as other medical students, rotators, and support staff. In addition to in-hospital patient evaluation and care, students on a consultation service are assigned to outpatient clinics. The students participate in departmental conferences and seminars. In addition, participation in most of the activities of the required Neuroscience Clerkship (e.g., didactic lectures) is encouraged (see Neurology 102 for description of clerkship details). The department is receptive to other specially tailored programs in areas such as epilepsy, stroke, movement disorders, neuroimmunology, etc., as well as clinical neurophysiology and research methods. H. Patwa and associates

**Neurology 104, Clinical Neurology Subinternship** Under appropriate supervision, students directly examine, diagnose, and manage patients on the neurology services at Yale-New Haven Hospital and attend daily teaching rounds and conferences. Hours to be arranged. Four-week rotations are recommended; alternative services are possible. Limited to two students each period. H. Patwa and associates

**Neurology 106b, Clinical Neurophysiology** Seminars and demonstrations in clinical applications of neurophysiology: electromyography and electroencephalography. Basic electronics are taught along with standard practice of recording and interpreting neurophysiology studies. J. M. Goldstein, H. Patwa, S. P. Novella

**Neurology 108b/NSCI 507b, Cellular and Molecular Mechanisms of Neurological Disease** Focuses on those diseases (Alzheimer’s, Parkinson’s, ALS and other neurodegenerative diseases, triplet repeat induced diseases, multiple sclerosis, epilepsy, etc.) in which modern neuroscience has advanced mechanistic explanations for clinical conditions. The course highlights recent molecular, electrophysiological, and imaging experiments in parsing disease mechanisms. The application of pathophysiologic understanding to therapeutics is considered. D. Navaratnam, S. Strittmatter, S. Waxman

**Neurology 112b, Neuro-Oncology** Neurological complications occur in approximately 20 percent of hospitalized oncology patients. The neurological complications of systemic cancer, as well as of primary CNS tumors, are discussed in depth. Issues regarding diagnosis and management of metastatic disease involving the nervous system as well as treatment-related complications are reviewed. In addition, metabolic and vascular disturbances and infections unique to the oncology patient that involve the nervous system are discussed. Specific cases are presented and arrangements are made to see specific patients
during the elective period. This course is offered every three weeks with two lectures each week and is limited to three or four students per session. J. Bachring

**Neurology 114b, Physiology of the Mammalian Nervous System**  The overall objective of this laboratory course is to introduce the student by hands-on experience to a variety of cellular electrophysiological techniques used in the study of the mammalian nervous system. Students set up a small electrophysiology laboratory and carry out experiments with the supervision of faculty. Laboratories include sucrose gap in whole nerve, single microelectrode current and voltage clamp recording of sensory neurons, field potential studies in rat hippocampal slice, and patch clamp analysis of cultured neurons. This course is limited to six to eight students. Permission of instructor is required for enrollment, 203.937.3802. J. D. Kocsis
NEUROSURGERY

Office: TMP 4, 203.785.2805

Professors R. A. Bronen (Diagnostic Radiology), R. T. Constable (Diagnostic Radiology), N. C. deLanerolle, C. C. Duncan, C. A. Greer, M. Gunel, H. P. Hetherington, C. C. LaMotte, J. A. Persing (Surgery), J. M. Piepmeier, D. E. Redmond, Jr. (Psychiatry), K. J. Ruskin (Anesthesiology), D. D. Spencer (Chair), A. N. Van den Pol

Associate Professors J. M. Baehring, H. Blumenfeld (Neurology), A. Bordey, V. L. Chiang, R. B. Duckrow (Neurology), M. H. Johnson (Diagnostic Radiology), J. T. King, J. W. Pan, K. P. Vives, A. Williamson

Assistant Professors K. M. Abbed, K. R. Bulsara, I. Cavus (Psychiatry), D. J. Gaal (Anesthesiology), A. Louvi, J. Schindler (Neurology), M. N. Spann, H. B. Treloar, F. S. Winstanley

Instructor M. S. Laurans

Associate Research Scientists N. Avdievich, K. Bilguvar, L. Chen, T. Eid (Laboratory Medicine), L. Fu, P. K. Ghosh, H. Huang, G. Wollmann, K. Wu, Y. Xu, K. Yasuno

Clinical Professor J. L. Kveton (Surgery)

Associate Clinical Professors I. Goodrich, D. E. Nijensohn


Lecturer E. M. Lydon

Neurosurgery 101, Neurological Surgery This is an externship in which the student is involved in inpatient evaluation, outpatient visits, supervised emergency, and inpatient consultations. The student attends the operating room, follows patients, and is expected to correlate the clinical experience with basic neuroscience. K. M. Abbed, J. Baehring, K. R. Bulsara, V. Chiang, M. DiLuna, R. B. Duckrow, C. C. Duncan, M. Gunel, J. King, M. S. Laurans, J. M. Piepmeier, D. D. Spencer, K. P. Vives

Neurosurgery 102, Investigational Neuroscience Typically taken during completion of the thesis requirement. Specific projects are by agreement with faculty members. Ongoing laboratory research includes the molecular neuroanatomical assessment of the epileptic focus (N. C. deLanerolle); ultrastructural assessment of organization and plasticity in local synaptic networks (C. A. Greer); the distribution and specificity of membrane-bound proteins directing neuronal growth (A. Van den Pol); glial cell function at synapses; intercellular communication promoting neurogenesis (A. Bordey); human and animal slice electrophysiology and metabolism (A. Williamson, A. Bordey); human and animal intracerebral microdialysis (D. Spencer, T. Eid); image-guided neurosurgical robotics and biophysical studies of brain imaging (D. Spencer, J. Duncan, K. Vives); stimulation of the brain for chronic neurological diseases (K. Vives, R. B. Duckrow, D. Spencer); molecular genetics of neurological disease (M. Gunel, M.
DiLuna); molecular mechanisms of brain morphogenesis and pathogenesis (A. Louvi); angiogenesis and neurogenesis, skull base anatomy, bypass techniques, and endovascular technology development (K. Bulsara); characterization of ensheathing cells in promoting axonal elongation (C. A. Greer). Clinical research includes neuropsychological studies (F. Brown, M. Spann, S. Winstanley), spine disease and clinical trials (K. Abbed, Z. Ghogawala), epilepsy surgery (D. Spencer, K. Vives), pediatric neurosurgery outcomes (C. Duncan, M. DiLuna), neurooncology (J. Piepmeier, J. Baehring), basic mechanisms in CNS lymphoma (J. Baehring), and stereotactic radiosurgery (V. Chiang, K. Vives). Available throughout the year. Arrangements made with C. A. Greer
OBSTETRICS, GYNECOLOGY, AND
REPRODUCTIVE SCIENCES

Office: FMB 307, 203.785.4212, Jill Aulenti, Manager of Medical Education


Associate Professors M. Azodi, I. Buhimschi, C. Bulletti (Adjunct), S. Diano, A. J. Duleba (Adjunct), S. J. Fortunato (Adjunct), F. Galerneau, X. Gao, J. B. Henrich (Medicine), M. Lee (Adjunct), U. Magriples, G. G. Mor, M. J. Paidas, T. J. Rutherford, D. Sakkas (Adjunct), E. U. Seli, N. S. Stachenfeld


Senior Research Scientist G. B. Huszar

Research Scientists S. M. Guller, Z. Hu, H. J. Kliman, G. Krikun, F. Schatz

Associate Research Scientists A. Alvero, S. Bellone, H. Du, U. A. Kayisli, M. Maduro, H. Qian


Lecturers  M. A. Haney  (Student Affairs), F. P. Haseltine, G. M. Johnson  (Student Affairs), E. Kuczynski, A. E. Moss  (Student Affairs), M. Reault  (Student Affairs)

Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship  This core clerkship is a six-week rotation in which students serve as clinical clerks on the following services: obstetrics (two weeks), gynecology (two weeks), and ambulatory OB/GYN (two weeks). Yale-New Haven Hospital and Bridgeport Hospital serve as the main clinical sites for this rotation. During the first week of the six-week clerkship, all students attend an in-depth evening teaching session with the Gynecologic Teaching Associates (GTA), where they are carefully taught pelvic and breast examination techniques, and practice these techniques with the GTA. These practice sessions, in addition to other simulation sessions, prepare students to adeptly handle actual patient examinations, review techniques and instruments, as well as understand how to manage patient encounters. During the Obstetrics portion of the rotation (one week Day Float and one week Night Float), the clinical clerk is assigned to the Labor and Delivery Unit and is expected to actively participate in patient care commensurate with his or her experience. Students are expected to work up and follow patients during the labor and delivery process, write notes during the intrapartum period, participate in vaginal deliveries, scrub in and assist in cesarean deliveries, and participate in the patient’s postpartum care. Students on the Gynecology services become familiar with the common disorders encountered in gynecological practice. They scrub for both major and minor surgeries, including those performed for gynecologic malignancy. The rotation offers an opportunity for the student to learn preoperative and postoperative management of gynecologic patients and to review pelvic and abdominal anatomy. The students spend two weeks in the ambulatory OB/GYN setting where they actively participate in antenatal care of pregnant patients as well as preventative and urgent health care visits for non-pregnant women. Students are supervised by attendings, physician associates, midwives, and residents as they learn to take histories, perform pelvic and breast exams, and gain experience in conducting normal obstetrical visits and routine gynecological care. The student is expected to gain experience in topics such as contraceptive counseling, family planning, menopause management, and other common patient complaints. Subspecialty experiences in Reproductive Endocrinology, Maternal-Fetal Medicine, Family Planning, Gynecologic Oncology, and Urogynecology are integrated into the clerkship. Throughout the rotation, a didactic curriculum is delivered to cover the core topics in Obstetrics and Gynecology, which includes seminars, lectures, standardized patients to practice patient counseling, clinical reasoning workshops, discussions, and student presentations.
and debates on controversial topics in OB/GYN. Evaluation of the student is based on clinical performance and knowledge, professionalism and attendance, participation at rounds and didactics, student presentations, and submitted write-ups for the student portfolio. The recommended text for this elective is *Obstetrics and Gynecology at a Glance* by Errol Norwitz and John Schorge. Clerkship director: J. Illuzzi

**Obstetrics, Gynecology, and Reproductive Sciences 107, Perinatal Elective** The Maternal Fetal Medicine Division of the Department of Obstetrics, Gynecology, and Reproductive Sciences offers a four-week High-Risk Obstetrics elective for fourth-year medical students. The student functions as a subintern and team member in the care of high-risk obstetrical patients at Yale-New Haven Hospital. In addition to inpatient duties, the student attends the outpatient clinic once a week. Students also participate in prenatal ultrasound sessions as well as labor and delivery activities. Numerous didactic conferences are held during the rotation. It is recommended that students use the text *Williams Obstetrics* (Cunningham) to prepare for this experience and for research during the rotation. Evaluation of the student is based on clinical performance, participation at rounds, and the student’s presentation of one evidence-based case review to members of the MFM Division. Prerequisite: Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship or equivalent. Faculty coordinator: F. Galerneau

**Obstetrics, Gynecology, and Reproductive Sciences 108, Reproductive Endocrinology and Infertility Elective** The Reproductive Endocrine and Infertility (REI) division offers a four-week subinternship to students. In addition to gaining knowledge about human reproductive endocrine function, students are introduced to disruptions in physiology and function that can lead to endocrinologic and infertility disorders. Common problems seen in REI practice include female and male infertility, recurrent pregnancy loss, polycystic ovarian syndrome, anovulation, amenorrhea, endometriosis, chronic pelvic pain, abnormal uterine bleeding, and uterine leiomyomas. Exposure to Advanced Reproductive Technologies (ART) is integrated into this elective. In addition to clinical activities in the office and the hospital, students have the opportunity to attend division conferences. Evaluation is based on clinical performance in the office and the operating room, and on an evidence-based presentation on an REI topic of interest. Prerequisite: Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship, or equivalent. It should be noted that it is necessary to travel to the Long Wharf Medical Center, 150 Sargent Drive, New Haven, for this subinternship program. There is no Night Call on this elective. Faculty coordinator: B. Rackow

**Obstetrics, Gynecology, and Reproductive Sciences 109, GYN-Oncology Elective** The Gynecology Oncology Division offers a four-week oncology elective to enhance the student’s knowledge of the diagnosis and management of women’s gynecologic malignancies. The student is exposed to all modalities of treatment for gynecologic malignancies including radical gynecological surgery, chemotherapy, and radiation therapy. The student is expected to be an integral part of the team in the management of the patients admitted to the service. The student admits patients and takes part in their care throughout the elective period. In addition to operating room exposure, extensive experience is gained in the postoperative management of these patients. On a weekly basis, students
also attend outpatient clinics, divisional teaching sessions, as well as the multidisciplinary tumor conference. There is no Night Call on this elective. The recommended text is *Clinical Gynecologic Oncology* (DiSaia). Prerequisite: Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship, or equivalent. Faculty coordinator: A. Santin

**Obstetrics, Gynecology, and Reproductive Sciences 110, Gallup Indian Medical Center (New Mexico) Elective** The general OB/GYN department of the Gallup Indian Medical Center (GIMC) in New Mexico offers a subinternship in Obstetrics and Gynecology to fourth-year Yale medical students. This center provides OB/GYN health care to a growing underserved population. There are no residents at GIMC and, therefore, the student gains first-assistant experience during this rotation. The center has 20,000 outpatient visits, 750 deliveries, and 400 surgical cases per year. Bedside rounds, hands-on teaching, formal and informal lectures, and weekly conferences (High-Risk OB, GYN M&M, C-Section review) are integrated into this extramural elective. Students also experience an immersion in the Navajo culture. Evaluation of students is based on clinical performance, participation at rounds, and a final case-based presentation. Night Call is approximately every 4–5 nights. The recommended text for this elective is Danforth’s *Obstetrics and Gynecology*. Prerequisite: Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship or equivalent. Students are responsible for the cost of travel, lodging, and miscellaneous expenses. Faculty coordinator: G. Lynch (on site at GIMC, New Mexico)

**Obstetrics, Gynecology, and Reproductive Sciences 111, Ambulatory Care OB/GYN Elective** The goal of this four-week elective is to provide a broad exposure to outpatient gynecologic issues, such as contraception, family planning, menstrual abnormalities, pelvic pain, sexually transmitted disease, infertility, disorders of urinary continence, screening for gynecologic malignancies, and management of menopausal symptoms that are commonly encountered in the ambulatory setting. The student also has the opportunity to participate in the prenatal care of pregnant women, in order to gain a deeper understanding of the changes in maternal physiology throughout gestation, prenatal diagnosis, genetic counseling, and the outpatient management of the pregnant woman and her fetus. This elective gives the student opportunities to work in the Yale-New Haven Hospital Women’s Center, the Yale Urogynecology practice, the Yale Gynecologic Oncology Clinic, the Yale Maternal-Fetal Medicine practice, and the private community office setting. The recommended text for this elective is *Obstetrics and Gynecology at a Glance* by Errol Norwitz and John Schorge. Prerequisite: Obstetrics, Gynecology, and Reproductive Sciences 103, Core Clerkship or equivalent. It should be noted that it is necessary to travel to the Long Wharf Medical Center, 150 Sargent Drive, New Haven, and other private community offices for this elective. There is no Night Call on this elective. Faculty coordinator: J. Illuzzi

**Obstetrics, Gynecology, and Reproductive Sciences 112, Family Planning/Reproductive Choice Elective** This two- or four-week elective provides hands-on experience in family planning at a freestanding women’s clinic. Family planning clinics provide resources to enable couples to determine whether, when, and how often to have children, with special consideration to birth spacing and maternal and child health. The student is exposed to contraceptive counseling and options counseling (including continuing
pregnancy, adoption, and elective abortion). In addition, the student participates in first-trimester ultrasound, medical and surgical abortions, and routine gynecologic care in a low-resource setting. Formal instruction in options counseling, use, and monitoring of all methods of contraception, sterilization, abortion technique, prevention and management of complications, use of local and moderate sedation, and the public health impact of family planning (global, economic, and community) is given. Additional topics, such as legislative policies relating to abortions, cross-cultural family planning knowledge, attitudes, and practices, and gynecologic care of disabled patients are covered at the discretion of the student. Evaluation is based on clinical performance in patient encounters and procedures, and on an evidence-based presentation on a related topic of interest. During this rotation, it is necessary to travel back and forth between YNHH and the Summit Medical Centers at 3787 Main Street, Bridgeport, and 360 Market Street, Hartford. Directions at www.summitcenters.com/summit-bridgeport/index.htm. There is no Night Call obligation on this elective. Faculty coordinator: S. Richman
OPHTHALMOLOGY AND VISUAL SCIENCE

Office: 40 Temple Street, 3rd floor, 203.785.2020

Professors M. Coca-Prados, N. Daw (Emeritus), C. Gonzalez (Emeritus), W. H. Miller (Emeritus), M. L. Sears (Emeritus), M. B. Shields, J. H. Sinard (Pathology), J. C. Tsai (Chair), Z. J. Zhou

Associate Professors R. A. Adelman, C. R. Bernardino, M. C. Crair (Neurobiology), J. J. Hoh (Epidemiology), L. J. Rizzolo (Surgery), K. M. Stoessel, C. J. Zeiss (Comparative Medicine), D. Zenisek (Cellular & Molecular Physiology)

Assistant Professors J. J. Huang, J. E. Kempton, J. K. Lee, N. Loewen, M. A. Materin, H. R. Mayer, P. C. Palmisano, D. J. Salchow

Instructors J. Joshi, S. T. Lee, R. K. Seth

Associate Research Scientists S. Ghosh, J. Lin, X. Xu

Research Affiliate G. Guedes

Clinical Professors I. Abrahams, R. L. Lesser, P. E. Liggett, D. E. Silverstone, T. J. Walsh


Ophthalmology and Visual Science 120, Elective in Clinical Ophthalmology This intensive two-to-four-week elective consists of twenty half-day or forty half-day sessions during which the students observe in subspecialty clinics, evaluate patients in general ophthalmology clinics, observe ophthalmic surgery, participate in department conferences, and review independent study material provided by the department. A short presentation on a specific topic provides an opportunity to explore one aspect of ophthalmology in depth. Subspecialty experiences include corneal and external eye diseases, glaucoma, neuro-ophthalmology, oculoplastics, pediatric ophthalmology, ocular oncology, and retinal diseases. Each two-week elective is limited to two fourth-year students. Offered all year. S. Forster, faculty, and resident staff
Ophthalmology and Visual Science 126, Preceptorial in Ophthalmology  In this elective the student has intensive exposure to one ophthalmic subspecialty under the direct supervision of one or two faculty members. Generally, the experience includes observing in a subspecialty clinic and the operating room, and may include completion of a minor research project. Prior to starting this elective, the student must have outlined a plan of study and obtained the approval of the supervising faculty members. Faculty members in corneal and external diseases, glaucoma, oculoplastics, pediatric ophthalmology, ocular oncology, and retina participate. A list is available from the director of medical studies, Dr. Susan H. Forster. Participation in the preceptorial is subject to approval by the director of medical studies. Limited to fourth- and fifth-year students. One to four weeks. Offered all year. Faculty
ORTHOPAEDICS AND REHABILITATION

Office: YPB 133, 203.785.2579


Associate Professors  J. N. Grauer, M. J. Medvecky, B. G. Smith, A. M. Vignery, J. J. Yue


Instructors  O. Adeoye, A. C. Cruz, D. A. Essig, B. C. Noonan, C. J. Telles

Associate Research Scientist  L. Li

Clinical Professors  J. K. Lynch, U. H. Weil

Associate Clinical Professors  H. B. Bradburn, R. N. Margolis, E. J. Sella


Lecturers  L. R. Brenner, M. J. Parisi, R. E. Stevenson, B. T. Zazulak

Orthopaedics and Rehabilitation 102, Surgical Clerkship  Twelve weeks total. Students in the first clinical year spend six weeks on the general surgical service of one of the following: Yale-New Haven Hospital, VA Connecticut Healthcare System, West Haven, or Hospital of St. Raphael. Each student is integrated into the clinical team and assigned to specific patients. Responsibilities include taking histories and performing physical examinations on their patients, participating in the evaluation and management of these patients, following patients’ progress, and participating as assistants in the surgical operations performed upon their assigned cases. In addition, the students are expected to participate in the evaluation and care of the critically ill patient in the intensive care unit and the injured patient in the emergency room. Emphasis is placed on involving students in the process of clinical problem solving with the guidance of the residents and the
attending preceptors. Conferences, case study groups, and rounds are held emphasizing this problem-oriented approach. Staff

The remaining six-week period is spent as a clinical clerk in the surgical specialties. Seven specialties are offered: cardiothoracic, otolaryngology, neurosurgery, orthopedics, pediatric, plastic and reconstructive, and urology. Each student elects three of these specialties and spends two weeks on each. While on the specialty of choice, the student is assigned patients in rotation and carries out complete histories, physical examinations, and certain procedures on these patients. While on the orthopaedic service, the student is assigned to one of the subspecialty teams, which include pediatric orthopaedics, spine, joint reconstruction, trauma, oncology, foot and ankle, hand, and sports medicine. The student is expected to participate, whenever possible, in the operative procedures performed on these patients and in their postoperative care. The student is also invited to attend the outpatient clinics in his or her assigned specialty. A series of one-hour lectures, rounds, or demonstrations is given each afternoon by the surgical specialties so that the student has the opportunity of gaining knowledge of the wide field of specialties even though he or she does not participate in every specialty as a clinical clerk. Directed by individual surgical specialty chiefs

Orthopaedics and Rehabilitation 104, Subinternship Limited to third- and fourth-clinical years, with prior clerkship rotation. The student is an active member of one of the orthopaedic teaching teams (pediatric orthopaedics, spine, joint reconstruction, trauma, oncology, foot and ankle, hand, and sports medicine). Inpatient, outpatient, and operating room experience is supplemented by regular conferences. Limited to four students, preferably for one-month rotations, throughout the year. Arrangements must be made with K. Umlauf

Orthopaedics and Rehabilitation 108, Subinternship, Adult Reconstructive and Rehabilitative Orthopaedics, VA Connecticut Healthcare System, West Haven The student functions as the intern on a large adult orthopaedic service. He or she attends conferences at the Veterans Affairs Connecticut Healthcare System, West Haven, and at Yale-New Haven Hospital. (YNHH conferences include an ongoing seminar on basic sciences as related to the musculoskeletal diseases.) The student is a full participant in the outpatient department and in the work of the operating room. This subinternship offers an intensive clinical experience with a variety of complex orthopaedic reconstructive problems. Rotations are usually for one month. By arrangement with K. Umlauf

Orthopaedics and Rehabilitation 110, Biomechanics Terminology Presentation and explanation of some basic biochemical terms used to describe body tissues, structures, and functions. More than one hundred basic engineering terms are introduced. The format of presentation for each term is (1) a precise definition followed by units of measurement in the new S.I. system, (2) a detailed explanation, and (3) examples of its use in the everyday experience as well as in the medical field. Mathematical formations are presented whenever necessary. Eight weeks, by arrangement. P. Ivancic

Orthopaedics and Rehabilitation 116, Basics of (Fracture) Diagnosis and Treatment A six-week seminar in the basic elements of diagnosis and treatment of a spectrum of musculoskeletal trauma. M. Baumgaertner
Orthopaedics and Rehabilitation 118, Musculoskeletal Anatomy  The basics of musculoskeletal anatomy from a functional anatomic and surgical perspective. The material is presented using prosected specimens. Knowledge of Anatomy 100a or its equivalent is assumed. M. Baumgaertner

Orthopaedics and Rehabilitation 120, Rehabilitation Medicine at Gaylord Hospital
A four-week elective rotation designed to provide a comprehensive view of rehabilitation. The elective is composed of didactic sessions and clinical experiences in both the inpatient and outpatient setting. Areas of primary focus include spinal cord injury, head trauma, multiple trauma, amputations, pain management, occupational rehabilitation, stroke, and other neurologic rehabilitation. Specific problems, such as gait deviation, heterotopic ossification, and spasticity are addressed. Therapeutic modalities—bracing and other durable medical equipment—are covered. The roles of allied health professionals, including physical, occupational, and speech therapies, and neuropsychology are demonstrated. Available throughout the year by arrangement with A. Sicklick and D. Rosenblum
PATHOLOGY

Office: LH 108, 203.785.2759


Associate Professors  M. W. Bosenberg (Dermatology), J. L. Brandsma (Comparative Medicine), S. E. Cowper (Dermatology), G. Haines, L. Hao, R. J. Homer, P. Hui, D. Jain, D. Kowalski, G. Kupfer (Pediatrics), R. Lazova (Dermatology), W. Min, G. Moeckel, V. Parkash, A. O. Vortmeyer


Instructor  A. Levi

Senior Research Scientists  M. Kashgarian, J. H. Kim, R. Yesner

Research Scientists  C. L. Howe, J. Li


Research Affiliate  A. Dimou

Clinical Professors  G. L. Davis, D. M. Lowell

Associate Clinical Professors  P. N. Fiedler, D. F. Miller

Assistant Clinical Professors  W. Carver, T. E. Ciesielski, N. A. Gelfman, G. M. Golenwsky, R. N. Kranwinkel

Clinical Instructors  W. G. Frederick, A. Katsnelson, S. L. Wain

PATH 600, Pathological Basis of Human Disease  Fundamental principles underlying the pathological alterations in function and structure that constitute the reaction of the organism to injury. Pathology of diseases involving special organs and systems. Correlation of the clinical and anatomical manifestations is emphasized. For EPH graduate students and MSTP students who are required to take Pathology 100 for graduate credit. D. Rimm and staff
PATH 616, Autopsy Pathology  Participation in the autopsy service with members of the house staff in Pathology. Participation in autopsies and the presentation and review of the clinical and anatomical findings of postmortem examinations with senior members of the department. Opportunities exist for correlation studies with previous biopsies, and clinical investigative and cell biologic techniques in relation to necropsy material. Six weeks minimum, full-time. Enrollment limited to two students. J. Sinard and staff

PATH 617, Anatomic Pathology  The department offers an elective to medical students in the third and fourth years that provides a broad experience in general diagnostic techniques. Students have opportunities to participate in surgical pathology, cytology (including fine-needle aspiration), and autopsy. A daily diagnostic conference is scheduled for both residents and students, and an additional two hours of conference are provided each week exclusively for the students. In addition to direct responsibilities in the handling of the cases, the student has the opportunity to apply the special techniques of electron microscopy, immunohistochemistry, and flow cytometry. A minimum of four weeks is suggested for this elective. Five students are accommodated every four to six weeks. A. B. West and staff

PATH 618b, Clinical and Pathologic Correlates in Renal Disease  A series of clinical pathologic conferences designed to illustrate clinicopathologic correlates in renal disease. At each session, one student acts as clinician and another as pathologist in the evaluation and discussion of case material from autopsies or renal biopsies. Discussions are informal, but require preparation in advance and all participants are expected to contribute in each session. One two-hour session per week for six weeks. Given once in spring term. Limited to twelve students. M. Kashgarian

PATH 620a and b, Laboratory Rotations in Experimental Pathology  Laboratory rotations for first-year graduate students. G. Shadel

PATH 630b, Biomaterial-Tissue Interactions  An in-depth survey of the interactions between tissues and biomaterials, with an emphasis on the molecular- and cellular-level events that influence the performance and longevity of clinically relevant devices. Background in chemistry and cell biology is assumed. Open to advanced undergraduates with permission of the organizer. T. Kyriakides

PATH 650b, Cellular and Molecular Biology of Cancer  A comprehensive survey of cancer research from the cellular to the clinical level. The relation of cancer to intracellular and intercellular regulation of cell proliferation is emphasized, as are animal models for cancer research. Background in molecular genetics and cell biology is assumed. Open to advanced undergraduates with permission of the organizers. D. Stern, R. Means

PATH 670b, Biological Mechanisms of Reaction to Injury  An introduction to human biology and disease as a manifestation of reaction to injury. Topics include organ structure and function, cell injury, circulatory and inflammatory responses, disordered physiology, and neoplasia. M. Kashgarian, J. Morrow, J. Madri, J. Sklar

PATH 680a, Seminar in Pharmacology and Molecular Medicine  Readings and discussion in topics relevant to cell biology, signal transduction, immunology, and molecular
medicine. The overall theme of the papers discussed is pathogenesis of human infectious disease. The class emphasizes analysis of primary research literature and development of presentation skills.

**PATH 690a, Molecular Mechanisms of Disease** This course covers aspects of the fundamental molecular and cellular mechanisms underlying various human diseases. Many of the disorders discussed represent major forms of infectious, degenerative, vascular, neoplastic, and inflammatory disease. Additionally, certain rarer diseases that illustrate good models for investigation and/or application of basic biologic principles are covered in the course. The objective is to highlight advances in experimental and molecular medicine as they relate to understanding the pathogenesis of disease and the formulation of therapies. M. Robek
PEDiATRICS

Office: LMP 4085, 203.785.4638


Instructors B. L. Emerson, N. I. Major, S. Mason, S. A. Massaro, D. M. Walker, I. S. Zenlea

Senior Research Scientist M. Genel

Research Scientists J. D. Dziura (Medicine), J. M. McGrath (Comparative Medicine), K. C. Schneider

Research Affiliates  N. Cope, P. Nowicka


Lecturers  S. Baum, C. D. Cook, C. M. Kennedy, K. Kinsella, S. E. Kuhn, P. Murtaugh, J. C. Samuel, E. Wolfson

Pediatrics 103, Third-Year Clerkship  The Pediatric Third Clerkship is an eight-week required rotation based on a national curriculum developed specifically for students beginning their clinical rotations. The students spend four weeks in the inpatient setting and four weeks in the outpatient setting. During the outpatient rotation, students are exposed to primary care as well as specialty care in the ambulatory setting. The inpatient portion of the rotation takes place at Yale-New Haven Hospital or Bridgeport Hospital. The objectives of the eight-week clerkship include improvement in knowledge as well as clinical skills such as history taking, physical examination skills, and problem solving.
During the rotation, students are observed performing these skills by designated supervisors. They have the opportunity to supplement and complement their clinical experiences by doing self-directed reading, completing computer-based cases, working with a simulated model, and interviewing standardized adolescent patients. Attention is paid to optimizing exposure to all pediatric age groups. The clinical experience is enhanced by a weekly interactive teaching session run by pediatric faculty members specifically for the third-year students. E. Colson, A. Asnes, M. Bizzarro

**Pediatrics 128, Hematology–Oncology** A survey of the normal and abnormal hematology and the common malignancies of infancy and childhood. Students make initial rounds with the attending and the ward team at 7:30 a.m. The mornings are then spent in clinic seeing outpatients who come for therapy or follow-up. More extended bedside rounds, including time allotted for family discussions, take place in the afternoon. Students are expected to prepare a brief presentation for the team. One student, full time for two weeks, throughout the academic year. G. Kupfer and staff

**Pediatrics 139, Pediatric Neurology** Students participate in the pediatric neurology clinic and see neurology patients on the pediatric wards. Up to two students, full time, for three weeks, throughout the academic year. L. R. Ment, G. Miller, B. Shaywitz, S. Shaywitz

**Pediatrics 143b/Surgery 136b, Pediatric Surgery** A general survey of pediatric surgical problems based on illustrated case summaries and subject presentation by students, with selected readings from the literature. Limited to six students, first and last six weeks of spring term. Once weekly, time to be arranged. C. K. Breuer, K. A. Diefenbach, R. J. Touloukian, M. A. McKee, R. L. Moss

**Pediatrics 144, Clinical Clerkship in Pediatric Cardiology** Developmental aspects of cardiovascular function as applied to infants and children in a clinical setting. Students are assigned to various members of the pediatric cardiology staff. Emphasis on physical diagnosis, use of noninvasive methods, and clinical physiologic correlates. Observation of catheterization and operative procedures. One student every four weeks throughout the year. J. Asnes, M. Brueckner, J. Fahey, A. H. Friedman, B. Weeks

**Pediatrics 146, Clinical Pediatric Infectious Diseases** Students participate in daily consultation rounds, Pediatric HIV/ AIDS Clinic, and weekly Pediatric Infectious Diseases Clinic. Students also participate in weekly pediatric infectious disease rounds by presenting the case studies of one or more inpatients whom they have examined to a group of faculty and fellows. Rounds last approximately two hours (Thursday afternoon) and monthly rounds with U.Conn occur the fourth Wednesday in the morning. Emphasis is placed on correlation of the clinical problem and its practical management with principles of infectious disease epidemiology and clinical microbiology (bacteriology, virology, and parasitology). Limited to two students per three- to six-week period throughout the academic year. W. Andiman, R. Baltimore, M. Cappello, M. Hostetter, I. G. Miller, T. Murray, E. Paintsil, G. Shapiro, M. Vazquez

**Pediatrics 148, Pediatric Endocrinology and Metabolism** An extensive exposure to clinical pediatric endocrinology, in particular problems of growth, sexual development, thyroid disorders, adrenal diseases, obesity, type 1 and 2 diabetes mellitus, and other
disorders of carbohydrate metabolism. A full six-week elective includes daily clinics in general endocrinology, diabetes, and hyperlipidemia/obesity, and the inpatient service. One student, full-time, six weeks, throughout the academic year. S. Boulware, T. Burgert, S. Caprio, T. Carpenter, E. Cengiz, M. Genel, S. Rivkees, W. V. Tamborlane, S. Weinzimer

**Pediatrics 152, Subinternship** Senior students serve four weeks on either the Infant/Toddler or School Age/Adolescent Unit at Yale-New Haven Hospital. Students are considered intern equivalents and therefore take on the same roles and responsibilities as the interns. Work is supervised by senior residents and attending physicians. D. Hersh

**Pediatrics 153, Pediatric Gastroenterology/Hepatology** A general survey of clinical pediatric gastroenterology and hepatology with particular emphasis on inflammatory bowel disease, malabsorption, diarrheal disorders, nutrition, and liver disease. The elective includes daily inpatient rounds including rounds with pediatric liver transplant service, three weekly GI clinics, inherited metabolic liver disease clinic, and several weekly clinicopathologic conferences, as well as observation of endoscopic procedures. One student, full-time, two-week rotation. N. Ameen, S. Husain, P. Mistry, D. Pashankar, R. Rosencrantz

**Pediatrics 154, Pediatric Respiratory Medicine** Students participate in the daily activities of the service in both the inpatient rounds and outpatient clinics. These include the evaluation of respiratory function in a variety of diseases including asthma, cystic fibrosis, bronchopulmonary dysplasia, pneumonia, aspiration syndromes, obstructive sleep disorders, and care of technology-dependent infants and children. Emphasis is on physical diagnosis. Rotations through the pulmonary function laboratory and the Children’s Sleep Center are available. Laboratory experience can be arranged. Participation in seminars and journal club are expected. One student, every two weeks, throughout the academic year. A. Bazzy-Asaad, S. Bhargava, M. Egan, A. Esquibies, P. Weiss

**Pediatrics 155, Pediatric Emergency Medicine** Senior students have the opportunity to evaluate and help manage a broad range of acute pediatric illnesses and injuries. Students are supervised by a Pediatric Emergency Medicine specialist. Clinical duties are scheduled by the program director. One student, full time, every four weeks throughout the year. L. D. Arnold and staff
PHARMACOLOGY

Office: SHM B204, 203.785.4372


Associate Professors  A. M. Bennett, D. A. Calderwood, M. P. DiGiovanna (Medicine), Y. Ha, M. E. Hodsdon (Laboratory Medicine), I. Lax, E. Lolis

Assistant Professors  T. Boggon, V. P. Eswarakumar (Orthopaedics & Rehabilitation), S. Jordt, E. Paintsil (Pediatrics), B. E. Turk

Senior Research Scientists  J. R. Cooper, W. H. Prusoff

Research Scientist  J. Yu


Lecturer  P. Klein

PHAR 502b, Seminar in Pharmacology and Molecular Medicine  Readings and discussion in topics relevant to cell biology, signal transduction, immunology, and molecular medicine. The overall theme of the papers discussed is pathogenesis of human infectious disease. The class emphasizes analysis of primary research literature and development of presentation skills. L. Kaczmarek

PHAR 504a, Pharmacology I: Interfering Selectively  Lectures covering antibiotics, immunotherapy, and chemotherapy. E. Lolis and staff

PHAR 506a and b, Methods in Pharmacological Research (Rotations)  Students work in laboratories of faculty of their choice. The period spent in each laboratory is one term. E. Lolis

PHAR 521a/NSCI 521a, Neuroimaging in Neuropsychiatry I: Imaging Methods  Neuroimaging methodologies including Positron Emission Tomography (PET), Single Photon Emission Computed Tomography (SPECT), Magnetic Resonance Imaging (MRI), functional Magnetic Resonance Imaging (fMRI), Magnetic Resonance Spectroscopy (MRS), and gene array imaging (GAI) are rapidly evolving tools used to study the living human brain. Neuroimaging has unprecedented implications for routine clinical diagnosis, for assessment of drug efficacy, for determination of psychotropic drug occupancy, and for the study of pathophysiological mechanisms underlying neurologic and psychiatric disorders. The course is designed to provide an overview of the theory and
current state of development of the different neuroimaging modalities. A second course, offered in the spring, focuses on applications. J. Staley, K. Cosgrove

**PHAR 521b/NSCI 521b, Neuroimaging in Neuropsychiatry II: Clinical Applications**

Neuroimaging methodologies including Positron Emission Tomography (PET), Single Photon Emission Computed Tomography (SPECT), structural Magnetic Resonance Imaging (sMRI), functional Magnetic Resonance Imaging (fMRI), Diffusion Tensor Imaging (DTI), and Magnetic Resonance Spectroscopy (MRS) are rapidly evolving tools used to study the living human brain. Neuroimaging has unprecedented implications for assessment of drug efficacy, for determination of psychotropic drug occupancy, and for the study of pathophysiological mechanisms underlying neuropsychiatric disorders. The course is designed to provide an overview of the application of state-of-the-art neuroimaging methods to research in neuropsychiatric disorders. It is recommended for PGY I-VI, Child Psychiatry Fellows, Interdepartmental Neuroscience students, and trainees in pharmacology, neurology, neurosurgery, psychiatry, psychology, and radiology. H. Blumberg, K. Cosgrove, J. Staley

**PHAR 528a, Principles of Signal Transduction**

The regulation of intracellular signaling is of fundamental importance to the understanding of cell function and regulation. This course introduces the broad principles of intracellular signal transduction. More detailed lectures on specific intracellular signaling pathways are given in which students learn both the basic and most recent and cutting-edge concepts of intracellular signaling. Topics include regulation of signaling by protein phosphorylation, small G proteins, G-protein-coupled receptors, hormones, phospholipids, adhesion, and gasses. A. Bennett

**PHAR 529b, Structural Pharmacology**

The goal of the course is to show students how concepts of structural biology are applied to areas of great importance in pharmacology such as protein kinases, proteases, cell surface receptors, integrins and other membrane-bound enzymes, and transporters and channels, and how these concepts facilitate drug development. Y. Ha, T. Boggon

**PHAR 560b²/C&M P 560b²/ENAS 570b²/MCDB 560b², Cellular and Molecular Physiology: Molecular Machines in Human Disease**

The course focuses on understanding the processes that transfer molecules across membranes at the cellular, molecular, biophysical, and physiological levels. Students learn about the different classes of molecular machines that mediate membrane transport, generate electrical currents, or perform mechanical displacement. Emphasis is placed on the relationship between the molecular structures of membrane proteins and their individual functions. The interactions among transport proteins in determining the physiological behaviors of cells and tissues are also stressed. Molecular motors are introduced and their mechanical relationship to cell function is explored. Students read papers from the scientific literature that establish the connections between mutations in genes encoding membrane proteins and a wide variety of human genetic diseases. E. Boulpaep, F. Sigworth
PSYCHIATRY

Office: 300 George Street, Suite 901, 203.785.2117


Instructor  A. Forray

Senior Research Scientists  J. D. Elsworth, P. I. Jatlow (Laboratory Medicine), J. Mason

Research Scientists  J. Olausson, J. Poling, E. Ralevski

The Department of Psychiatry teaches in both preclinical and clinical years. The preclinical course is a study of medical behavioral science, rather than an introduction to clinical psychiatry. Specific clinical skills, such as interviewing and the recognition and management of psychiatric syndromes, are taught later in the curriculum and especially during the required clinical clerkship in Psychiatry. Electives are available for students with special interest in selected areas. All advanced clinical electives are numbered in the 200s. The required core clinical clerkship (Psychiatry 106) is a prerequisite for enrollment in any of these advanced clinical electives; an advanced clinical elective may not be taken instead of the required core clinical clerkship. Please note: All students signing up for a seminar elective must also register with the Medical Student Education Office, Department of Psychiatry, 785.2089 (pending approval of the instructor).

**Psychiatry 101a, Patient-Centered Interviewing: The Patient’s Story** This segment of the Pre-Clinical Clerkship focuses on the experience of illness—how people react to and cope with illness. The various psychosocial factors and psychological defenses which impact on the experience of illness, such as age, gender, social supports, socioeconomic
status, and coping style, are examined. There is an emphasis on the patient interview and techniques for eliciting the patient’s story in an empathic and effective manner. The format includes lectures, demonstration interviews, and practice with standardized patients. R. Belitsky and Departments of Psychiatry and Medicine faculty

**Psychiatry 101b, Biological Basis of Behavior**  Lectures are integrated with the Neurology course, and include principles and neural mechanisms of learning and memory; neural systems involved in fear and anxiety; neural systems involved in reward and drug addiction; neural systems involved in stress; and neural systems involved in attention. Following each lecture, a psychiatrist interviews patients diagnosed with obsessive-compulsive disorder, panic disorder, cocaine abuse, post-traumatic stress disorder, and schizophrenia. These 1.5-hour clinical presentations, which include time for questions, link psychiatric symptoms to the neural mechanisms discussed in the lecture on that day. 2.5 hours per week. Department of Psychiatry faculty

**Psychiatry 106, Clinical Clerkship**  Skills and knowledge needed for the general practice of medicine are acquired in a clinical psychiatric setting. There is a “Patients in Crisis” component that emphasizes: conducting a competent screening interview in order to identify symptoms of a psychiatric or substance abuse disorder; performing a complete mental status examination of a patient who is emotionally disturbed or mentally ill; making a differential diagnosis, and planning for further evaluation and tests that would be useful in deciding among various diagnostic possibilities; making recommendations for biological, psychosocial, and/or social treatment interventions; assessing whether or not dangers to or from a patient exist; and understanding indications and procedures for lawful involuntary commitment of a patient to a mental hospital for treatment. There is also a “Psychiatry at the Interface with Medicine” component designed to provide students with an understanding of the presentation of psychiatric illness in patients with co-morbid medical disorders. Emphasis is placed on screening interviews, including mental status examination; identification of symptoms; and differential diagnosis and initial treatment recommendations of patients with co-morbid medical and psychiatric illness. Special emphasis is placed on evaluation of psychiatric emergencies and competency to make informed medical decisions. Additionally, students have the opportunity to learn and develop clinical skills through carefully designed outpatient experiences. R. Rohrbaugh, J. Barron, and Department of Psychiatry faculty

**Psychiatry 203, Subinternship in Hospital Psychiatry, Inpatient Division, Connecticut Mental Health Center (CMHC)**  Intensive work with inpatients who suffer from major psychiatric disorders with or without substance abuse. Emphasis is on assessment, acute treatment, and arrangement of continuing care in the community. The subintern functions as an integral member of a multidisciplinary treatment team. Clinical research participation is encouraged. Opportunities are available to explore special areas of interest (e.g., forensics, psychopharmacology, administrative) with CMHC faculty. The elective is given on the inpatient service, CMHC. Scheduled throughout the year during regular clerkship rotations for a minimum of four weeks. Prerequisite: Psychiatry 106. Maximum registration: one student per rotation. M. Jean-Baptiste, R. Beech, M. Sernyak, J. Steiner, H. Zonana, and staff. To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.
Psychiatry 205, Subinternship in Medical Psychiatry (Consultation Psychiatry), Yale-New Haven Hospital, 2039 Clinic Building This is an advanced clinical elective for third- and fourth-year students who have a particular interest in the psychiatric disorders that can occur in medical-surgical patients. The staff has special interests in differential diagnosis of medical vs. psychiatric illness, in psychopharmacology, and in computer applications in psychiatry. Each student works up patients in parallel with advanced residents in inpatient and emergency department settings. Teaching occurs on daily walk rounds. Scheduled throughout the year during regular clerkship rotations (except July and August) for a minimum of four weeks. (Note: Fourth-year students will be given preference.) Prerequisite: Psychiatry 106. Maximum registration: one student per rotation. P. Desan, T. Stewart, W. H. Sledge, A. Papsun, and staff. To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.

Psychiatry 206, Advanced Clinical Elective in Law and Psychiatry at Connecticut Mental Health Center This elective affords opportunities for third- and fourth-year students to observe and participate in “competency to stand trial” evaluations with a clinical team that makes these assessments at the New Haven Correctional Center. In addition, they may attend Law School classes with students who represent psychiatric patients, observe civil commitment procedures, and attend probate court hearings as well as the criminal proceedings in local New Haven Superior Courts. Students attend work seminars where case evaluations and write-ups are discussed and prepared, and read appropriate legal cases and psychiatric literature. Students may be able to participate in parts of evaluations of insanity defense, custody determination, and other forensic issues. They attend the Law and Psychiatry Seminar during their rotation. Scheduled throughout the year (except August) during regular clerkship rotations for a minimum of four weeks. Prerequisite: Psychiatry 106. Maximum registration: one student per rotation. H. Zonana, P. Thomas, and staff. To enroll in this advanced clinical elective, please contact Dr. Robert Rohrbaugh.

Psychiatry 208, Subinternship in Consultation-Liaison Psychiatry at the VA Connecticut Healthcare System (VACHS), West Haven, Connecticut The Consultation-Liaison Service at the VACHS West Haven provides consultation to acute medical and surgical units, specialized rehabilitation units, and outpatient primary care clinics. Students participate in the management of patients with close supervision from attending staff. The goals of the rotation are (1) to increase skill in conducting a psychiatric interview which maximizes the collection of pertinent clinical data; (2) to use the data collected in formulating and implementing treatment plans emphasizing the interplay of biological and psychological factors in the patients’ presentation; (3) to experience the satisfaction of caring for patients with complex medical and psychiatric illness. Scheduled throughout the year for a minimum of four weeks. Open to third- and fourth-year medical students. Prerequisite: Psychiatry 106. Maximum registration: one student per rotation. C. Chiles and staff. To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.

Psychiatry 209, Substance Abuse Elective An elective clinical training experience in substance abuse for interested third- and fourth-year students. The primary training site is the Outpatient Service at the Veterans Administration Connecticut Healthcare System (VACHS) in West Haven. The substance abuse elective is scheduled for four weeks. This
experience is an intensive one in which students work closely with addicted patients with chronic mental illness. Students interested in learning about medical detoxification from alcohol and/or opiates may participate in an intensive two-week elective in the Ambulatory Detoxification Clinic at the VACHS. Students learn about the evaluation and treatment of alcohol withdrawal and detoxification. Patients with benzodiazepine and opiate dependence are also treated in this clinic. Prerequisite: Psychiatry 106. Maximum registration: two students. VACHS Faculty: L. Trevisan, I. Petrakis. To enroll in this advanced clinical elective, please contact Dr. Robert Rohrbaugh.

Psychiatry 210, Subinternship in Hospital Psychiatry, Inpatient Division, Yale-New Haven Psychiatric Hospital  Intensive work with patients who suffer from major psychiatric disorders and range in age from college students to middle age. Emphasis is on assessment, acute treatment, and arrangement of post-discharge follow-up care in the community. The subintern is an advanced clerk functioning as a member of the multidisciplinary treatment team, taking on primary clinician and psychiatric/medical responsibilities for patients under the supervision of senior clinicians. The elective is given on the inpatient service at Y-NHPH; clinical research and outpatient involvement may be options. This subinternship is available throughout the year, during regular clerkship rotations for a minimum of four weeks. Prerequisite: Psychiatry 106. Maximum registration: one student per rotation. R. M. Milstein, M. Bowers, R. Hoffman, R. Tampi, and staff. To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.

Psychiatry 211, Subinternship in Clinical Neuroscience, Clinical Neuroscience Research Unit Inpatient Division  This clerkship offers senior medical students the opportunity to work closely with a variety of patients who are hospitalized during their participation and treatment in research protocols. The Clinical Neuroscience Research Unit (CNRU) is a thirteen-bed inpatient ward with associated outpatient clinics and basic science laboratories on the third floor of the Connecticut Mental Health Center (CMHC). Supervised implementation of novel psychopharmacology, exposure to multiple aspects of clinical and basic science research, and in-depth experience with individual and group psychotherapies are educational aspects of this elective. Patients’ diagnostic categories include depression, obsessive-compulsive disorder, schizophrenia, cocaine abuse, and substance abuse. Scheduled throughout the year for a minimum of four weeks. Prerequisites: Psychiatry 101 and 106. Maximum registration: one student per rotation. R. Malison, G. Heninger, and staff. To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.

Psychiatry 234, Subinternship in Adolescent Inpatient Psychiatry, Yale-New Haven Psychiatric Hospital  The purpose of this elective is to provide fourth-year medical students interested in child and adolescent psychiatry and/or adolescent medicine an experience in working with adolescents presenting with acute psychiatric illness. The elective is based on the adolescent inpatient unit at Yale-New Haven Psychiatric Hospital, a short-term fifteen-bed unit serving adolescents and young adults. Students gain exposure to a diverse patient population with severe mood, psychotic, behavioral, and/or substance use disorders, as well as begin to understand the intricacies of working with families and systems providing care for adolescents with significant emotional and/or behavioral disturbances. Teaching activities include daily rounds and weekly case
Psychiatry 238, Subinternship in Early Psychosis: STEP Clinic

STEP (Specialized Treatment Early in Psychosis) is a multidisciplinary team-based treatment for individuals presenting early in the course of a psychotic illness. This clinic offers unique opportunities in the assessment and treatment of a population that is difficult to access in other clinical settings. Trainees have the opportunity to observe structured research assessments and interpretation of these scales in light of careful clinical follow-up. Given the diagnostic and prognostic heterogeneity of illnesses presenting with psychosis, this experience provides the opportunity to develop clinical expertise in diagnosis and management of a range of mental health issues. The enriched treatment includes cognitive-behavioral group therapy, family psycho-education groups, and cognitive remediation in addition to vocational support with a focus on rapidly reintegrating patients back to age-appropriate social, educational, and employment goals. Students have the opportunity to observe or participate in any of these treatments. The multidisciplinary and pluralistic nature of the intervention presents a rich opportunity to participate in collaborative care with other mental health disciplines. Trainees can also participate in regular seminars sponsored by the STEP and PRIME (Prevention through Risk Identification, Management, and Education) clinics. The latter is a research clinic focused on prodromal psychosis. Positions: 1-2. Site: Connecticut Mental Health Center (CMHC).

Scholarship: STEP is designed as a service delivery model with a built-in observational cohort and experimental pragmatic randomized controlled trial. Trainees are invited to take an active role in the various domains of scholarship including community and clinician education efforts, publication, and learning about clinical research design. V. Srihari (clinic director), J. Pollard (project director and family interventions coordinator, STEP clinic), C. Tek, (program director, Psychoisis Team), L. Hyman (team leader, Psychoisis Team), S. Woods (director, PRIME Clinic), J. Saksa (CBT coordinator, STEP Clinic), B. Walsh (clinical coordinator, PRIME Clinic). To enroll in this subinternship, please contact Dr. Robert Rohrbaugh.

Psychiatry 325/CHLD 325, Child Psychiatry Elective, Yale Child Study Center

The aim of this elective is to provide the student with an intensive experience in infant, child, and adolescent psychiatry. The curriculum includes assessments of normal development and psychopathology in childhood, treatment methods, and research in major disorders of childhood. The elective takes advantage of the wide range of ongoing seminars, conferences, and clinical services in place at the Child Study Center. Teaching methods include seminars, conferences, field observations, ward rounds, and School of Medicine practica selected by the student following consultation with the director of medical studies, Child Study Center. Open to fourth-year students throughout the year. A. Martin, D. Stubbe, J. Woolston, and staff. To enroll in this advanced clinical elective, please contact A. Martin directly at 203.688.6016 or 203.785.3370.
Surgery

Office: FMB 102, 203.785.2697


Instructors A. Amirafshari, J. Kohout

Research Scientists M. S. Kidd, T. L. McCarthy

Associate Research Scientists S. Bian, Y. Kondo, S. Peng (Anatomy & Experimental Surgery), L. Song, S. Yang, J. Zhou, S. Zhou

Clinical Professors S. Ariyan, J. E. Fenn, J. F. Kveton, R. S. Stahl, E. Yanagisawa


School of Medicine


Surgery 103, Surgery Clerkship  The twelve-week Surgery Clerkship Block includes four weeks of General Surgery and four weeks of Surgical Specialties, as well as two weeks of Anesthesiology and two weeks of Emergency Medicine. The clerkship is scheduled with the following start dates: June 21, 2010; September 13, 2010; January 3, 2011; and March 28, 2011. Students have an opportunity to complete a preference form for site assignments but are not guaranteed a specific assignment, nor are they able to indicate which rotation will be done first; this is determined by the clerkship administrator based on space availability.

The four-week General Surgery Core rotation can be completed at Yale-New Haven Hospital the West Haven VA Medical Center. Service preferences include Gastrointestinal Surgery, Oncology Surgery, Trauma/Emergency Surgery, and VAMC Surgery.

The mandatory four-week special services rotation is divided into two weeks on the Anesthesiology service and two weeks on Emergency Medicine.

For the four weeks of surgical subspecialty rotations, students may select two, two-week subspecialty services, which are completed at YNHH. Service preferences include: Cardiac Surgery, Endocrine, Orthopaedic Surgery, Otolaryngology−ENT, Pediatric Surgery, Peripheral Vascular, Plastic Surgery, Thoracic Surgery, Transplant, or Urology.

There is a surgery mentoring program throughout the twelve-week block. The Surgery Clerkship Block may not be done away and must be completed by the end of the third year. Clerkship director: R. Gusberg

Surgery 122, Subinternship, Plastic Surgery  Clinical experience as an intern on a large clinical ward. The student has experience in the management of craniofacial anomalies, burns, trauma, hand surgery, head and neck surgery, reconstructive surgery of the head and neck and extremities, microsurgery, as well as surgery of the congenital anomalies and cosmetic surgery. Limited to one fourth-year student per month with a minimum of one-month rotations. Arrangements must be made with J. A. Persing
Surgery 123b, Biochemical and Metabolic Foundations of Plastic and Reconstructive Surgery  
A course designed to provide in-depth understanding of the molecular events underlying the diverse clinical phenomena encountered in plastic surgery. Topics include fluid electrolyte metabolism in the burn patient, biochemistry and metabolism of collagen and its relation to scarring and connective tissue disorders, normal wound healing, and disorders of the same. Offered for four weeks during the spring term, two hours per week by arrangement. Limited to two fourth-year students. J. A. Persing

Surgery 129, Cardiopulmonary Transplantation  
Intensive exposure to laboratory and clinical aspects of cardiac, cardiopulmonary, and pulmonary transplantation. Special emphasis on the relation between ongoing laboratory studies and clinical practice in this field. Clinical involvement in preoperative assessment of prospective transplant candidates, donor procurement, intraoperative management, and postoperative immunosuppression. Limited to one student by arrangement with J. Elefteriades

Surgery 130, Subinternship, Cardiothoracic  
Intensive exposure to preoperative and postoperative management of adult and pediatric cardiothoracic surgical patients and to intraoperative conduct of surgical procedures, with active participation in the operating room and in regular conferences. Students attend regular seminars covering major areas of cardiothoracic surgery with members of the faculty, and may be required to present a seminar on a subject in cardiothoracic surgery to faculty and resident staff. Limited to two students in the second clinical year. Three or six weeks by arrangement with J. Elefteriades

Surgery 131, Subinternship, General Thoracic  
Intensive exposure to preoperative and postoperative management of general thoracic surgical patients and to the intraoperative conduct of surgical procedures involving the lung, the chest wall, the thymus, and the esophagus. Included is an organized lecture series covering the entire field of general thoracic surgery. Students are expected to present a seminar at the conclusion of the subinternship, focusing on a specialized topic in general thoracic surgery. Six weeks by arrangement with J. Elefteriades

Surgery 141, Outpatient Otolaryngology  
This is an opportunity for those students who have not had exposure in otolaryngology to spend time with a full-time attending otolaryngologist seeing outpatients in an office setting. Timing is quite flexible and a student may spend one to three mornings or afternoons each week for one to four weeks. By arrangement with C. T. Sasaki and the full-time otolaryngology staff

Surgery 142, Emergency Medicine  
The student participates in the evaluation and treatment of adult emergency patients, learning appropriate work-up and therapy. Students are expected to attend morning conferences four mornings per week and to work four twelve-hour shifts that may include nights and weekends. Prerequisite: Surgery 103

Surgery 143, Care of the Intensive Care Unit Patient  
Didactic and clinical sessions in the Yale-New Haven Hospital SICU prepare the student to provide treatment for the critically ill patient. Topics include cardiopulmonary resuscitation, airway and ventilator management, assessment of the multiple trauma patient, and management of sepsis. Prerequisite: Surgery 103. Three to four weeks, by arrangement. K. Davis, L. Kaplan
Surgery 144, Trauma Surgery  The student functions as an extern and participates actively in trauma service rounds, teaching conferences, trauma resuscitation, and operative management of trauma cases. Students are expected to attend conferences and take inhouse call with the chief resident of the trauma service. Prerequisite: Surgery 103. K. Davis

Surgery 150, Plastic and Reconstructive Surgery  Evaluation and reconstructive surgery of deformities of congenital, traumatic, and neoplastic origin. Includes inpatient, outpatient, and operating room experience, supplemented by regular conferences. Limited to two students; available throughout the year. J. A. Persing

Surgery 151, Subinternship, General Surgery  (Four weeks) Offered throughout the academic year at both Yale-New Haven Hospital and VA Connecticut Healthcare System, West Haven. Limited to second clinical year, one or two students per month. Arrangements must be made with W. Longo

Surgery 152, Advanced Senior Seminar, General Surgery  This is a weekly evening seminar series covering advanced and controversial topics in general surgery. Three one-hour sessions include dinner at faculty homes and run from October through February. Reprints of pertinent articles provided prior to each seminar. Staff

Surgery 153, Subinternship, Otolaryngology  This clinical experience is independent of the third-year Surgery/Otolaryngology rotation, and takes place on an individual basis. It includes operating room experience, ward responsibilities, and involvement in outpatient ENT. Yale-New Haven Hospital, the Hospital of St. Raphael, and the VA Connecticut Healthcare System, West Haven, are available for the rotation. Minimum rotation of four weeks; limited to one student. C. T. Sasaki

Surgery 158, Surgery at Waterbury Hospital  A well-supervised fourth-year clerkship including teaching rounds, operating room experience, outpatient clinical experience, and conferences in radiology, pathology, oncology, vascular surgery, and general surgery. Daily ICU rounds are conducted with an attending physician. Six weeks, for one or two students, with room and meals provided. E. Kwasnik and staff

Surgery 159, Subinternship, Urology  This clinical experience is independent of the standard third-fourth year Urology rotation and takes place on an individual basis. It includes operating room experience, inpatient responsibilities, and involvement in the outpatient clinics at Yale-New Haven Hospital and West Haven VA Hospital. Subintern participates in scheduled conferences. Limited to one or two students for a three- or four-week rotation. Starting dates of the rotations are negotiable. R. Weiss

Surgery 160, Surgery at St. Mary’s Hospital, Waterbury  Six-week subinternship in an affiliated community hospital of 400 beds, consisting of ward and operative experience, teaching rounds, and conferences. An independent general surgical residency exists at St. Mary’s. S. Dudrick and staff

Surgery 165, Surgery at Bridgeport Hospital  For a student contemplating a career in clinical surgery, an opportunity to function as a team member with residents and attending staff in a large community hospital. General surgery with fundamental pre- and
postoperative care, appropriate operating room activity, basic bedside diagnostic and therapeutic hands-on experience, emphasis on intensive care unit, trauma, and burns. Each student is expected to present a twenty-minute research or clinical topic of choice at completion of the course. Room and board available on duty. Limited to one or two students for six- to eight-week rotations in the fourth year. Staff

Surgery 171, Subinternship, Peripheral Vascular Surgery  A practical experience in the diagnosis and management of vascular disease, including pre- and postoperative care. The scope of the experience includes orientation to the noninvasive vascular diagnostic laboratory, outpatient care in the Yale Vascular Center, and inpatient management (including patients in the OR, ICU, and the vascular surgery unit). Four weeks, by arrangement with B. Sumpio and staff

Surgery 172, Subinternship, Transplantation Surgery  This intensive clinical experience emphasizes the preoperative assessment, intraoperative care, and postoperative management of patients suffering end-stage organ system failure who are cared for by transplantation. Emphasis also includes the management of immunosuppressive medication regimens and the care of post-transplant problems. Available throughout the year, one or two students, for one month. Arrangements with S. Emre and staff

Surgery 173, Experimental Transplantation Surgery and Immunobiology  Clinical and laboratory studies into problems relevant to the field of organ transplantation. Students work under the tutelage of a member of the faculty in the Division of Organ Transplantation. Original projects must be mutually agreed upon, and may include studies into the immunology of allograft rejection, the mechanism of immunosuppressive drug action, immunological monitoring of patients following transplantation, or biochemical markers to potentially identify early rejection of renal, hepatic, pancreatic, or small bowel allografts. Available throughout the year, one or two students, time commitment by arrangement. S. Emre and staff

Surgery 174, Subinternship in Surgical Oncology  Intensive exposure to surgical aspects of the treatment of cancer in clinic, hospital, and operating room. The interaction between surgery, medical oncology, and radiation therapy is experienced by following patients receiving multiple forms of therapy. Available throughout the year, one or two students, preferably for one-month rotations. Arrangements with R. R. Salem

Surgery 175, Pediatric Cardiac Surgery  Intensive exposure to pediatric cardiac surgery with emphasis on preoperative evaluation and postoperative management. The student observes the changes in pre- and postoperative physiology and spends much of the time following postoperative patients. The student is exposed to the use of ventilators in the pediatric patient, inotropic and vaso-dilating agents, evaluation and treatment of low cardiac output state, and the use of pacemakers. Weekly conferences include surgical conferences, preoperative conferences, catheterization conference, pre- and postoperative clinics, as well as weekly sessions with the attending staff. Some technical experience and instruction are provided in the operating room according to the student’s interest. Limited to two students per month. T. Shinoka, G. S. Kopf, and R. Kim. Arrangements to be made with the pediatric cardiac surgery office
Surgery 176, Subinternship in Pediatric Surgery  In-depth exposure to the broad spectrum of pediatric surgical problems of the abdomen, chest, head and neck, and pelvis. The student obtains experience with correction of congenital anomalies, management of trauma, care of the critically ill child, and management of solid tumors. The subintern is an integral part of the pediatric surgical team and is expected to take in-house night call every third night. Contact L. Moss
Therapeutic Radiology 101, Clinical Clerkship in Radiation Therapy  A flexible program designed to introduce the medical student to radiation therapy. The biological and physical bases of radiation therapy, together with clinical practice and ongoing research. Clinical exposure to patients with malignant disease, with between seventy and one hundred treated daily in the department. The student takes part in departmental conferences, clinics, lectures, and individual teaching sessions. Limited to two students at any time. L. D. Wilson and staff

Therapeutic Radiology 102, Clinical Radiobiology  This course is designed to provide residents in radiation oncology with a comprehensive review of clinical radiobiology as it applies to the practice of radiation therapy. The course is open to residents and fellows in other disciplines interested in radiobiology as it applies to clinical oncology. The course participant attends approximately twenty lectures in clinical radiobiology, which are delivered throughout the academic year between September and June. Scheduling by arrangement with L. D. Wilson

Therapeutic Radiology 201b, A Survey of Radiobiology  A review of the interaction of radiation on living organisms, progressing from DNA damage to complex mammalian systems. Modern concepts in molecular biology and cell kinetics are emphasized in understanding the sequelae of this interaction and the mechanism by which the organism responds to the injury produced. Fourteen sessions. By arrangement with Radiobiology staff
Therapeutic Radiology 305, Principles and Methods of Radiation Dosimetry  A graduate-level course for physics students or medical students with a strong physics background who want to learn about radiation dosimetry as it applies to medical practice. Topics include X-ray spectra, ionization chambers, X-ray exposure and the roentgen, mass energy-absorption coefficients, the Bragg-Gray principle, stopping power and linear energy transfer, chemical dosimeters, instrumentation, and physical aspects of radiology. Approximately twenty hours of tutorial sessions. Scheduling by arrangement with instructor. R. Nath

Therapeutic Radiology 306, Laboratory Projects in Radiation Dosimetry  Students are given problems that relate to and supplement long-term, ongoing radiation dosimetry projects within the department. Prerequisite: Therapeutic Radiology 305, or its equivalent. Scheduling by arrangement with instructor. R. Nath
Yale Cancer Center

Office: WWW 205, 203.785.4095
Director: T. J. Lynch (Cancer Center)

MEMBERSHIP

Professors  K. S. Anderson (Pharmacology), P. W. Askenase (Internal Medicine), A. E. Bale (Genetics), L. M. Bartoshuk (Surgery), G. P. Beardsley (Pediatrics), J. R. Bender (Internal Medicine), J. L. Bologna (Dermatology), A. L. M. Bothwell (Immunobiology), D. E. Brash (Therapeutic Radiology), R. R. Breaker (Molecular, Cellular & Developmental Biology), R. Bucala (Internal Medicine), Y.-C. Cheng (Pharmacology), L. Cooley (Genetics), D. L. Cooper (Cancer Center), J. Costa (Pathology), J. Craft (Internal Medicine), P. Cresswell (Immunobiology), P. De Camilli (Cell Biology), F. Detterbeck (Surgery), M. V. Dhodapkar (Internal Medicine), D. C. Di Maio (Genetics), J. S. Duncan (Diagnostic Radiology), R. L. Edelson (Dermatology), J. A. Elias (Internal Medicine), J. J. Fischer (Therapeutic Radiology), R. A. Flavell (Immunobiology), B. G. Forget (Internal Medicine), F. Foss (Cancer Center), J. E. Galan (Microbial Pathogenesis), J. Geibel (Surgery), P. M. Glazer (Therapeutic Radiology), E. J. Glusac (Pathology), H. Hetherington (Neurosurgery), T. R. Holford (Epidemiology & Public Health), M. C. Horowitz (Orthopaedics & Rehabilitation), K. L. Insogna (Internal Medicine), S. V. Kasl (Epidemiology & Public Health), P. B. Kavathas (Laboratory Medicine), K. K. Kidd (Genetics), W. H. Konigsberg (Molecular Biophysics & Biochemistry), D. R. Lannin (Surgery), D. J. Leffell (Dermatology), P. Lengyl (Emeritus; Molecular Biophysics & Biochemistry), H. Lin (Cell Biology), P. M. Lizardi (Pathology), K. B. Low (Adjunct; Therapeutic Radiology), T. J. Lynch (Cancer Center), J. A. Madri (Pathology), N. J. Maihle (Obstetrics, Gynecology & Reproductive Sciences), S. T. Mayne (Epidemiology & Public Health), R. McCorkle (School of Nursing), J. M. McNiff (Dermatology), R. Medzhitov (Immunobiology), I. G. Miller (Pediatrics), M. S. Mooseker (Molecular, Cellular & Developmental Biology), J. S. Morrow (Pathology), R. Nath (Therapeutic Radiology), M. H. Nathanson (Internal Medicine), S. O’Malley (Psychiatry), R. E. Peschel (Therapeutic Radiology), J. M. Piepmeier (Neurosurgery), J. S. Pober (Pathology), W. H. Prusoff (Pharmacology; Emeritus), A. M. Pyle (Molecular Biophysics & Biochemistry), C. A. Redlich (Internal Medicine), H. A. Risch (Epidemiology & Public Health), S. Rockwell (Therapeutic Radiology), J. K. Rose (Pathology), F. H. Ruddle (Biology), N. H. Ruddle (Epidemiology & Public Health), P. Salovey (Psychology), W. M. Saltzman (Biomedical Engineering), A. Santin (Obstetrics, Gynecology & Reproductive Sciences), A. C. Sartorelli (Pharmacology), C. T. Sasaki (Surgery), D. G. Schatz (Immunobiology), J. Schlessinger (Pharmacology), P. E. Schwartz (Obstetrics, Gynecology & Reproductive Sciences), W. C. Sessa (Pharmacology), M. J. Shlomchik (Laboratory Medicine), J. Sklar (Pathology), B. R. Smith (Laboratory Medicine), E. L. Snyder (Laboratory Medicine), S. Somlo (Internal Medicine), Y. H. Son (Therapeutic Radiology), J. A. Steitz (Molecular Biophysics & Biochemistry), D. F. Stern (Pathology), P. Sung (Molecular Biophysics & Biochemistry), P. J. Tattersall (Laboratory Medicine), R. E. Tigelaar (Dermatology), R. Udelsman (Surgery), A. N. Van den Pol (Neurosurgery),
S. M. Weissman (Genetics), K. R. Williams (Adjunct; Molecular Biophysics & Biochemistry), T. Xu (Genetics)

**Associate Professors** S. J. Baserga (Molecular Biophysics & Biochemistry), A. M. Bennett (Pharmacology), M. W. Bosenberg (Dermatology), E. H. Bradley (Epidemiology & Public Health), J. L. Brandsma (Comparative Medicine), L. G. Cantley (Internal Medicine), Z. Chen (Therapeutic Radiology), E. B. Claus (Epidemiology & Public Health), J. Concato (Internal Medicine), C. M. Crews (Molecular, Cellular & Developmental Biology), J. Deng (Therapeutic Radiology), M. P. Di Giovanna (Cancer Center), P. G. Gallagher (Pediatrics), F. J. Giordano (Internal Medicine), M. Girardi (Dermatology), C. P. Gross (Internal Medicine), L. N. Harris (Cancer Center), S. A. Higgins (Therapeutic Radiology), F. Hyder (Diagnostic Radiology), B. A. Jones (Epidemiology & Public Health), J. P. Knisely (Therapeutic Radiology), M. T. Knobf (School of Nursing), A. J. Koleske (Molecular Biophysics & Biochemistry), D. S. Krause (Laboratory Medicine), G. Kupfer (Pediatrics), R. Lazova (Dermatology), H. Lin (Epidemiology & Public Health), E. Lolis (Pharmacology), M. J. Mamula (Internal Medicine), G. G. Mor (Obstetrics, Gynecology & Reproductive Sciences), D. Narayan (Surgery), W. M. Philbrick (Internal Medicine), D. L. Rimm (Pathology), K. B. Roberts (Therapeutic Radiology), M. G. Rose (Cancer Center), T. J. Rutherford (Obstetrics, Gynecology & Reproductive Sciences), S. Seropian (Cancer Center), W. D. Shlomchik (Cancer Center), J. H. Sinard (Pathology), M. J. Solomon (Molecular Biophysics & Biochemistry), J. B. Sweasy (Therapeutic Radiology), M. Sznol (Cancer Center), H. S. Taylor (Obstetrics, Gynecology & Reproductive Sciences), A. M. C. Vignery (Orthopaedics & Rehabilitation), L. D. Wilson (Therapeutic Radiology), S. L. Wolin (Cell Biology), J. J. Wysolmerski (Internal Medicine), H. Yu (Epidemiology & Public Health), H. Zhao (Epidemiology & Public Health), T. Zheng (Epidemiology & Public Health)

**Assistant Professors** M. Abu Khalaf (Cancer Center), J. Bachring (Neurosurgery), T. Biederer (Molecular Biophysics & Biochemistry), D. J. Boffa (Surgery), T. Boggon (Pharmacology), D. Braddock (Pathology), D. A. Calderwood (Pharmacology), T. Carling (Surgery), C. Cha (Surgery), B. Chang (Therapeutic Radiology), H. H. Chao (Internal Medicine), G. G. Chung (Cancer Center), R. H. Decker (Therapeutic Radiology), H. A. Deshpande (Cancer Center), D. C. Duffey (Surgery), T. Fahmy (Biomedical Engineering), A. Galvani (Epidemiology & Public Health), S. N. Gettinger (Cancer Center), A. J. Giraldez (Genetics), J. Guo (Internal Medicine), Y. Ha (Pharmacology), M. Hodsdon (Laboratory Medicine), M. Hurwitz (Cancer Center), M. L. Irwin (Epidemiology & Public Health), N. Ivanova (Genetics), A. Iwasaki (Immunobiology), S. E. Jordt (Pharmacology), N. S. Kadan-Lottick (Pediatrics), S. M. Kaech (Immunobiology), T. H. Kim (Genetics), S. H. Kleinsein (Pathology), H. M. Kluger (Cancer Center), M. Krauthammer (Pathology), P. Li (Genetics), B. Lindenbach (Microbial Pathogenesis), Y. Liu (Therapeutic Radiology), C. Loeser (Internal Medicine), S. Ma (Epidemiology & Public Health), X. Ma (Epidemiology & Public Health), S. Mani (Therapeutic Radiology), M. A. Materin (Ophthalmology & Visual Science), K. M. McCarty (Epidemiology & Public Health), R. E. Means (Pathology), M. S. Moran (Therapeutic Radiology), W. Mothes (Microbial Pathogenesis), J. P. Noonan (Genetics), A. A. Patel (Therapeutic Radiology), J. L. Reiter (Obstetrics, Gynecology & Reproductive Sciences), M. Robek (Pathology), F. A.
The center supports a $100 million research base to promote translational research through collaborations between and within eight basic, epidemiological, and clinical research programs. Basic research programs in Signal Transduction, Gene Regulation and Functional Genomics, Cancer Genetics, Molecular Virology, and Developmental Therapeutics are integrated with clinical research programs in Immunology and Immunotherapy and Radiobiology and Radiotherapy Research, and one epidemiological program, Cancer Prevention and Control. The center also supports twelve shared facilities that are available for oncological research: Flow Cytometry, Cesium 137 Irradiator, Rapid Case Ascertainment, Animal Genomics, Clinical Research Services, Biostatistics, Proteomics, Cancer Genetic Counseling, Microarray, Pathology Tissue Services, Biomedical Informatics, and Immune Monitoring. Information regarding patient care, research, and cancer prevention and control may be obtained by telephoning 203.785.4095.
School of Nursing

The following courses in the School of Nursing are offered to interested medical students. For more information, contact faculty of record.

**NURS 625b, Children with Chronic Conditions/Disabilities and Their Families** 1.5 credit hours. This course provides students with a forum to discuss theoretical concepts of illness in relation to a family-centered model of care for children and adolescents with a chronic condition/disability and their families. Relevant issues and such topics as service delivery, financing of care, and legislative and health policy issues are explored. Emphasis is placed on the role of advanced practice nursing in the provision of health care for children and adolescents with a chronic condition. Required for all pediatric nurse practitioner students in the first year of specialization. Open to others with permission of the instructor. One and one-half hours per week. Pediatric Nurse Practitioner Faculty

**NURS 633a, Health Promotion in Infants and Children** 2 credit hours. This lecture course is designed to introduce the student to the primary care of children from infancy through pre-adolescence. Concepts and theories related to well-child care are explored. Clinical applications of the theories and principles of preventive and optimal health care are emphasized. Required for all pediatric nurse practitioner and family nurse practitioner students in the first year of specialization. Open to others with permission of the instructor. Two hours per week. P. Jackson Allen

**NURS 723a/HPA 592a, Concepts and Principles of Aging** 1.5 credit hours. This elective multidisciplinary course is designed to introduce students to the major concepts and principles of gerontology and to a variety of bio-psychosocial theories on aging. Delivery systems of care for older adults are explored along with the current social policy initiatives as they relate to this growing population. Research initiatives are discussed and students are encouraged to explore geriatric care issues in their own specialty/discipline as well as in related disciplines. Required for gerontological nurse practitioner and adult/gerontological nurse practitioner students. One and one-half hours per week. Faculty

**NURS 733b/REL 977b, Living with Dying** 1.5–3.0 credit hours. This course develops students’ cultural and gender awareness, understanding, and competencies in creating environments to relieve suffering for individuals and their families who have experienced a death or are caring for someone who is dying. Emphasis is on nonpharmacologic interventions to relieve suffering, including spiritual, interpersonal, and socio-cultural interventions. The course is structured with the premise that relief from suffering, meaning, and transcendence at the end of life are best achieved and understood through the interpersonal use of narrative techniques, like storytelling, to facilitate communication. One and one-half hours per week. R. McCorkle

**NURS 769a, Advanced Concepts and Principles of Diabetes Care** 2 credit hours. This seminar focuses on the concepts and principles of diabetes managed care based on the American Diabetes Association Standards of Care (2006). It includes principles of primary care (screening, early detection, intervention, patient education), secondary care principles related to diabetes management, tertiary care related to complications, various
treatment modalities, patient education, and self-care. These concepts and principles of care are presented relative to type of diabetes (Type 1, Type 2, gestational and pregnancy, and secondary), age, developmental stage, duration of disease, and ethnicity. A multidisciplinary approach to care issues is emphasized, incorporating the contributions of other disciplines in the collaborative management of diabetes. Important aspects of living with a chronic illness such as the psychological, social, occupational, and economic are also emphasized. Required in the final year of study for all students in the diabetes care concentration. Open to others with permission of the instructor. Two hours per week. V. Jefferson

**NURS 961b, Contemporary Issues in Health Policy and Politics** 3 credit hours. This course focuses on the structural variables that affect the processes and outcomes of care. It is based on several premises. First, health policy at the national, state, and local levels of governments influences access to, cost of, and quality of health care. Second, understanding structural variables (delivery systems, populations at risk, and environment) that shape health care delivery enhances understanding of process and outcome variables. Third, clinicians and researchers need to be able to analyze health policy and communicate their recommendations effectively to policy makers. Finally, an understanding of the structural variables in comparative context enhances understanding of global health issues. Required for all doctoral students. Open to others by permission of the instructor. Three hours per week. Faculty
Postgraduate Study

Graduate medical education in clinical departments is based upon the residency training programs of the Yale-New Haven Medical Center. Initial appointments are offered in Anesthesiology, Dermatology, Diagnostic Imaging, Emergency Medicine, Internal Medicine Primary Care, Internal Medicine, Neurology, Neurosurgery, Obstetrics and Gynecology, Ophthalmology, Orthopaedics and Rehabilitation, Otolaryngology, Pathology, Pediatrics, Plastic Surgery, Psychiatry, Surgery, Therapeutic Radiology, and Urology; appointments are made through the National Resident Matching Program or the appropriate specialty matching program (Ophthalmology and Urology). Residencies are also offered in Dentistry and Pediatric Dentistry. Subspecialty residency programs are offered in the following specialties:

- Anesthesiology
- Cardiothoracic Surgery
- Child Psychiatry
- Dermatology
- Diagnostic Radiology
- Emergency Medicine
- Internal Medicine
- Neurology
- Neurosurgery
- Nuclear Medicine
- Obstetrics and Gynecology
- Pathology and Laboratory Medicine (AP/CP)
- Pediatric Surgery
- Pediatrics
- Psychiatry
- Transplant Surgery
- Vascular Surgery

The School of Medicine and Yale-New Haven Hospital are joined in the establishment and management of an Office of Graduate Medical Education of Yale-New Haven Medical Center. Residents at the Yale-New Haven Hospital and the VA Connecticut Healthcare System, West Haven, are enrolled as postgraduate students in the School of Medicine in addition to their hospital appointments. In most of the clinical departments, a limited number of fellowships for research or clinical training are also available.

Detailed information concerning residency programs may be obtained from the chair of the appropriate department. Applicants must be graduates of an approved medical school in the United States or Canada or have successfully completed the requirements of the ECFMG and have a valid ECFMG certificate. General information may be obtained by visiting the Yale-New Haven Medical Center Graduate Medical Education Web site (www.ynhh.org/med_prof/grad_med.html) or the Yale School of Medicine site (http://info.med.yale.edu/ysm/departments) and visiting the appropriate department.
Continuing Medical Education

The mission of the Yale University School of Medicine’s Center for Continuing Medical Education is to advocate and support the continuing professional development of health care professionals. Through its Center for Continuing Medical Education, the School of Medicine offers a full range of evidence-based educational programs that enhance the practitioner’s knowledge base, provide updates and review, and expand professional skills.

Yale School of Medicine is accredited by the Accreditation Council for Continuing Medical Education as a provider of continuing medical education (CME). Under the auspices of the Yale Medical Group, the educational programs sponsored by Yale CME include primary care, specialty, and subspecialty topics in the field of medicine. The scope of these activities involves the body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

Yale CME provides content and material tailored to complement the participant’s needs and schedule through the following educational activities: conferences and workshops; enduring materials; and distance education by personal computer and other innovative formats. The offerings are intended to enhance physician and other health professionals’ professional development and influence their behavior for the purpose of improving health outcomes and patient care.

Courses offered include (a) review courses and symposia designed to present advances in the diagnosis and management of selected disorders of general interest; (b) courses of interest to physicians in a particular specialty; and (c) courses dealing with matters of public health and its administration, developed by the faculty of the Department of Epidemiology and Public Health.

Most regularly scheduled educational conferences (Grand Rounds) of the Yale-New Haven Medical Center are also open to all physicians for CME credit. The School of Medicine also facilitates the presentation of continuing education programs for allied health personnel.

Also available for physicians and certain other health care workers are the Online Learning Program, which includes Medical Center Grand Rounds videos, and The Diabetes Newsletter. Based on the contents of well-known and widely circulated medical publications, the examination program is developed, edited, and supervised within the Center for Continuing Medical Education.

The Yale CME Web site and the Yale-New Haven Medical Center Weekly Schedule of Events contain the most timely and detailed listing of all these events. They may be accessed at http://cme.yale.edu or http://info.med.yale.edu/calendar. Inquiries should be addressed to the Center for Continuing Medical Education, PO Box 208052, New Haven CT 06520-8052; telephone, 203.785.4578; e-mail, cme@yale.edu.
Doctors of Medicine

CLASS OF 2010

Pending completion of all requirements

Aaron Weldon Aday, B.S., Vanderbilt University. Epigenetic Programming of Blood Vessel Identity. Internal Medicine. Brigham and Women's Hospital, Boston, Mass.


Eloise Davis Austin, A.B., Harvard University. The Use of Author Conflict-of-Interest Disclosures by Medical Students and Residents While Searching for Internet-Based Prescribing Information. Internal Medicine. New York Presbyterian Hospital–Columbia, New York, N.Y.

Mary Ann Badon, B.A., Clark University; M.B.A., Yale University. Injection Treatment of Trigger Finger in Patients with Previous Injection-Resistant Trigger Finger. Surgery-Preliminary. Beth Israel Medical Center, Boston, Mass.,


Emma Longley Barber, B.S., Yale University. Optimal Duration of Intrapartum Antibiotic Prophylaxis for Group B Streptococcus and Effects on Practice Patterns. Obstetrics and Gynecology. McGaw Medical Center of Northwestern University, Chicago, Ill.

Jessica Rosalind Berwick, A.B., Harvard University. Predictors of Antiretroviral Adherence Among HIV-Infected Children and Adolescents in Harare, Zimbabwe. Internal Medicine/Primary. Brigham and Women's Hospital, Boston, Mass.

Wenya Linda Bi, A.B., M.A., Harvard University; Ph.D., Yale University. The Role of BEHAB/brevican in Gliomas Neurosurgery. Brigham and Women's Hospital/Children's Hospital of Boston, Boston, Mass.


Marie Suzy Brubacher, B.S., Yale University. *CFTR from Divergent Species Respond Differently to the Channel Inhibitors CFTRinh-172, Glibenclamide, and GlyH-101*. Internal Medicine. Beth Israel Medical Center, Boston, Mass.


Allison Fitzgerald Carey, B.S., Pennsylvania State University; Ph.D., Yale University. *Odor Coding in the Malaria Mosquito Anopheles Gambiae*. Postdoctoral Fellowship. Pasteur Institute, Paris, France


Justin Brent Cohen, A.B., Princeton University; M.H.S., Yale University. *Assessing Plasticity: The Populations Responsible for the Epithelial Engraftment on Marrow-Derived Cells*. Surgery-Preliminary. Barnes-Jewish Hospital, St. Louis, Mo. Plastic Surgery. Barnes-Jewish Hospital, St. Louis, Mo.


Simmie Lorene Foster, B.A., University of California–Berkeley; Ph.D., Yale University. *Gene-Specific Control of Inflammation by TLR-induced Chromatin Modifications*. Internal Medicine/Primary. Massachusetts General Hospital, Boston, Mass.


David Adam Gimbel, B.S., M.H.S., Yale University. **Impairment of Synaptic Plasticity by Amyloid-β Oligomers and Memory Dysfunction in Transgenic Alzheimer’s Mice Requires Cellular Prion Protein.** Neurosurgery. Yale-New Haven Hospital, New Haven, Conn.

Robert Udell Glazier, Jr., B.S., Utah Valley State College. **Antioxidant Polymorphisms and Susceptibility to Solvent-Induced Hearing Loss in Factory Workers.** Transitional. Intermountain Medical Center, Murray, Utah. Ophthalmology. University of Colorado School of Medicine, Denver, Colo.


Philip Scorza Hall, A.B., Princeton University. **Two Methods to Detect Clonal Populations of Human Cells In Situ.** Internal Medicine. Stanford University Programs, Stanford, Calif.

Maria Ann Han, B.A., Miami University of Ohio. **The Impact of Medication Use and Medical Morbidity on Symptom Burden in Older Patients.** Internal Medicine/Primary. Massachusetts General Hospital, Boston, Mass.

Matthew S. Hayden, B.A., Oberlin College; Ph.D., Yale University. **The IKK Complex & TNFR1 Signaling to NF-κB.** Immunology Postdoctoral Fellowship. Columbia University, New York, N.Y.


Elias N. Kassis, B.S., Bates College. **Nanoparticle Use in Modulation of Transplant Rejection in a Murine Model.** Internal Medicine. Massachusetts General Hospital, Boston, Mass.

Ravi Raja Kavasery, B.S., Johns Hopkins University. **Routine Opt-out HIV Testing in Jails: Findings from Two Prospective Controlled Trials.** Internal Medicine/Primary. Brigham and Women’s Hospital, Boston, Mass.


Tracy St. Louis MacIntosh, B.S., University of Toronto; M.S., M.P.H., Tufts University. *Socially Perceived Race, Perceived Healthcare Discrimination and Preventive Health Service Utilization*. Emergency Medicine. Yale-New Haven Hospital, New Haven, Conn.

Patrick Ryan Maloney, B.A., Pomona College. *Protection of the Brain From Oncolytic Virus: Attenuation of Vesicular Stomatitis Virus In-Vitro and In-Vivo Using Antiviral Drugs*. Neurosurgery. Mayo Clinic College of Medicine, Rochester, Minn.


Christopher Perry Miller, B.A., University of Pennsylvania; M.H.S., Yale University. *Functional Range of Motion of the Cervical and Lumbar Spine with and without Bracing*. Orthopaedic Surgery. Yale-New Haven Hospital, New Haven, Conn.


Katherine Marie Mullen, A.B., Harvard University. *Preterm Birth Results in Alterations in Neural Connectivity at Age 16 Years*. Transitional. Tufts Medical Center, Boston, Mass. Diagnostic Radiology. Brigham and Women’s Hospital, Boston, Mass.


Esi Wusiwa Nkyekyer, B.A., Bryn Mawr College. *Relationship between Concern for Vision Loss and Self Care Management in Type 1 and Type 2 Diabetics*. Internal Medicine/Primary. University of Washington Affiliated Hospitals, Seattle, Wash.

Christopher Painter, B.A., Case Western Reserve University; M.H.S., Yale University. Non-Invasive Evaluation of Tissue Engineered Conduits with a Novel Nano-Particulate Contrast Agent. Transitional. Hospital of Saint Raphael, New Haven, Conn. Anesthesiology. Stanford University Programs, Stanford, Calif.


Sonja K. Rakowski, B.A., Barnard College. Ethical Considerations in Access to Experimental Drugs for Treatment Use. Internal Medicine/Primary. Brigham and Women’s Hospital, Boston, Mass.

Deepak Angara Rao, A.B., Harvard University; Ph.D., Yale University. Modulation of Human Allogeneic Memory T Cell Responses by Endothelial Injury. Internal Medicine. Brigham and Women’s Hospital, Boston, Mass.

Swapna Reddy, B.A., University of Pennsylvania; M.H.S., Yale University. Analysis of CD8 Tumor Infiltrating Lymphocytes in Human Cutaneous Squamous Cell Carcinoma. Medicine/Primary-Preliminary. Yale-New Haven Hospital, New Haven, Conn. Dermatology. Yale-New Haven Hospital, New Haven, Conn.


JoAnna Chandra Salmon, B.A., University of Virginia. Avoiding Adverse Cardiovascular, Fall Injury, and Medication-Related Outcomes: Older Adults’ Priorities and Rationales. Family Medicine. Virginia Commonwealth University/Shenandoah Valley, Front Royal, Va.

Sudipa Sarkar, B.A., Vanderbilt University. Medical Students in the Mountains: The Appalachian Summer Projects of the Student Health Coalition (SHC) and the Student American Medical Association (SAMA). Internal Medicine. Yale-New Haven Hospital, New Haven, Conn.


Mark Schlangel, B.A., Brandeis University. Analysis of Pulse Transit Time with the Inclusion of a Microvascular Component in Head-up Tilt and Blood Withdrawal Induced Central Hypovolemia. Anesthesiology. New York Presbyterian Hospital–Columbia, New York, N.Y.


Joshua William Trufant, B.A., Brown University. *Phactr1 as a Novel Biomarker to Distinguish Malignant Melanoma from Nevus*. Medicine-Preliminary. Mount Sinai Hospital, New York, N.Y. Dermatology. New York University School of Medicine, New York, N.Y.

Dimitrios Nicolas Tsirigotis, B.S., McGill University; Ph.D., Yale University. *Insulin-stimulated Phosphate Transport and ATP Synthesis in Skeletal Muscle*. Cardiac Surgery. University of Toronto, Toronto, Canada

Aimee Marie Two, B.S., Brown University; M.H.S., Yale University. *In Vivo Analysis of CCM3, a Gene Involved in Cerebral Cavernous Malformation Development*. Neurosurgery. University of Southern California, Los Angeles, Calif.

Matthew Vestal, B.A., Johns Hopkins University; M.H.S., Yale University. *Ictal Functional Neuroimaging of Childhood Absence Epilepsy*. Neurosurgery. Brigham and Women’s Hospital/Children’s Hospital of Boston, Boston, Mass.


David Anthony Wacker, B.S., University of Minnesota; M.S., Ph.D., Cornell University. *HOXA Chromatin Barrier Contains CTCF Binding Site-Dependent Promoter Activity*. Internal Medicine/Emergency Medicine. University of Maryland Medical Center, Baltimore, Md.


Yvonne S. Yang, B.A., Ph.D., Yale University. *Reticulons Protect Against Neurodegeneration in a Mouse Model of Amyotrophic Lateral Sclerosis*. Psychiatry/Research. UCLA Semel Institute, Los Angeles, Calif.
Mia Yun Platt, B.S., Ph.D., Yale University. *Ubiquitination of MHC II in Dendritic Cells and B cells: Roles and Regulations*. Pathology. Massachusetts General Hospital, Boston, Mass.

Qi Zheng, B.A., Grinnell College; M.H.S., Yale University. *Barriers to Eye Care Among Patients with Diabetes in the Greater New Haven Area*. Internal Medicine. Mount Sinai Hospital, New York, N.Y.

**STUDENTS RECEIVING THE M.D. AND PH.D. DEGREES**

Wenya Linda Bi
Allison Fitzgerald Carey
Joanna Y. Chin
Dario Joseph Englot
Simmie Lorene Foster
Matthew S. Hayden
Sotiria Palioura
Craig Daniel Platt
Deepak Angara Rao
David Scales
Vinita Takiar
Carrie Thiessen
Dimitrios Nicolas Tsirigotis
Yvonne S. Yang
Mia Yun Platt

**STUDENT RECEIVING THE M.D. AND M.D.P. DEGREES**

Christopher Painter
Swapna Reddy
Jonathan Conrad Romanyszyn
Heather Korkosz Speller
Aimee Marie Two
Matthew Vestal
Qi Zheng

**STUDENT RECEIVING THE M.D. AND M.P.H. DEGREES**

Gifty Kwakye Darkoh

**STUDENT RECEIVING THE M.D. AND M.B.A. DEGREES**

Mary Badon

**STUDENTS RECEIVING THE M.D. AND M.H.S. DEGREES**

Melissa Suen Arief
Joseph Isadha Boonsiri
Justin Brent Cohen
Kathleen Jo Elayda Corbin
Zachary Andrew Corbin
Neil Bipinchandra Desai
Benjamin Peter Erickson
David Adam Gimbel
Adam Licurse
Sean McEvoy
Leah McNally
Christopher Perry Miller
Yasha S. Modi
Kemunto Mokaya
Nikhil R. Nayak
Enrollment for 2009–2010

POSTGRADUATE STUDENTS

Members of the resident staff at Yale-New Haven Hospital and the VA Connecticut Healthcare System’s West Haven campus are enrolled as postgraduate students in the School of Medicine. Information on postgraduate students is available from the Office of Postgraduate Medical Education.

REGISTERED FOR THE DEGREE OF

DOCTOR OF MEDICINE

Fourth-Year Class

Aaron Weldon Aday (B.S. Vanderbilt Univ. 2005), Bristol, Tenn.
Sungeeta Agrawal (B.A. Northwestern Univ. 2006), Concord, Mass.
Oheneewaa Larbi Ahima (B.A. Smith Coll. 2001), Kumasi, Ghana
Melissa Suen Arief (B.A. Vassar Coll. 2005), Gillette, N.J.
Eloise Davis Austin (A.B. Harvard Univ. 2002), San Antonio, Tex.
Mary Ann Badon (B.A. Clark Univ. 2005), Farmington, Conn.
Hasani Kigos Baharanyi (A.B. Harvard Univ. 2004), Auburn, Ala.
Emma Longley Barber (B.S. Yale Univ. 2006), Chicago, Ill.
Jessica Rosalind Berwick (A.B. Harvard Univ. 2004), Newton, Mass.
Marie Suzy Bewley (B.S. Yale Univ. 2004), Guilford, Conn.
Wenyia Linda Bi (B.A., M.A. Harvard Univ. 2002), Gaithersburg, Md.
Gregory Michael Blanton (B.A. Yale Univ. 1996), Sikeston, Mo.
Joseph Isadha Boonsiri (B.S. Yale Univ. 2005), Grosse Ile, Mich.
Jacob Wade Brubacher (B.S. Texas Christian Univ. 2005), North Newton, Kans.
Edmund Burke (B.S. Yale Univ. 2004), Yonkers, N.Y.
Philip Johannes Butler (B.S. Massachusetts Inst. of Technology 2004), Lubbock, Tex.
Jonathan Ari Cabin (B.A. Univ. Pennsylvania 2001), Woodbridge, Conn.
Allison Fitzgerald Carey (B.S. Pennsylvania State Univ. 2002), Pittsburgh, Pa.
Juliana Chen (B.A. Univ. Rochester 1990), Newton, Mass.
Joanna Y. Chin (A.B. Harvard Univ. 1999), Brooklyn, N.Y.
Justin Brent Cohen (A.B. Princeton Univ. 2005), Armonk, N.Y.
Michelle S. Collins (B.S. Univ. California [San Diego] 2004), Pasadena, Calif.
Laura Gilbert Hollingsworth Cooney (B.S. Johns Hopkins Univ. 2006), Oakland, Md.
Kathleen Jo Elayda Corbin (B.A. Loyola Univ. [Chicago] 2005), Houston, Tex.
Zachary Andrew Corbin (B.S. Yale Univ. 2004), Roanoke, Va.
Michael William DeStefano (B.S. Georgetown Univ. 2003), Radnor, Pa.
Dario Joseph Englott (B.S. Univ. Scranton 2003), Swoyersville, Pa.
Benjamin Peter Erickson (A.B. Harvard Univ. 2004), Williamstown, Mass.
Temidayo Ayodele Fadelu (B.S. Baylor Univ. 2005), Lagos, Nigeria
Benjamin Falit (B.A. Brandeis Univ. 2003; J.D. Harvard Univ. 2006), Cheshire, Conn.
Drew Georgi (B.A. Weber State Univ. 2004), North Ogden, Utah
David Adam Gimbel (B.S. Yale Univ. 2003), Plantation, Fla.
Robert Udell Glazier (B.S. Utah Valley State Coll. 2005), Orem, Utah
Carolyn Graham Goldberg (B.S. Brown Univ. 2005), Westport, Conn.
Amanda Nicole Graff-Baker (B.S. Stanford Univ. 2004), Lafayette, Calif.
Jana Halfon (B.S. Yale Univ. 2004), Midlothian, Va.
Philip Scorza Hall (A.B. Princeton Univ. 2005), Milford, Ohio
Bryan Kun Hong (B.S. Yale Univ. 2006), Montebello, Calif.
Yoshio Arturo Kaneko (A.B. Harvard Univ. 2002), Guilford, Conn.
Ravi Raja Kavasery (B.S. Johns Hopkins Univ. 2003), Coram, N.Y.
Konstantin Krepskin (A.B. Harvard Univ. 2006), Brooklyn, N.Y.
Gifty Kwakye Darkoh (B.S. Yale Univ. 2005), Rockville, Md.
Simon Erik Laganiere (B.S. McGill Univ. 2003), Ile Cadieux, Quebec, Canada
Robert Leone (A.B. Harvard Univ. 1989), East Quogue, N.Y.
Adam Licurse (B.A. Yale Univ. 2005), Fayetteville, N.Y.
Tracy St. Louis MacIntosh (B.S. Univ. Toronto 2003; M.S., M.P.H. Tufts Univ. 2006),
Cambridge, Ontario, Canada
Patrick Ryan Maloney (B.A. Pomona Coll. 2004), Gulf Breeze, Fla.
Peter Kaveh Mansuripur (B.S. Cornell Univ. 2006), Tucson, Ariz.
Anthony Thomas Marfeo (B.S. Northeastern Univ. 2004), North Scituate, R.I.
Sean McEvoy (B.S. Univ. Iowa 2004), Ryan, Iowa
Leah McNally (B.S. Duke Univ. 2005), Fort Lauderdale, Fla.
Christopher Perry Miller (B.A. Univ. Pennsylvania 2005), Hamden, Conn.
Monica Clare Mix (B.S. Yale Univ. 2006), Hudson, Ohio
Yasha S. Modi (B.A. New York Univ. 2005), Newburgh, N.Y.
Kemunto Mokaya (B.S. Yale Univ. 2005), Nairobi, Kenya
Katherine Marie Mullen (A.B. Harvard Univ. 2003), Cortlandt Manor, N.Y.
Nikhil R. Nayak (B.A. Georgetown Univ. 2003), Flanders, N.J.
Abby Lynne Nerlinger (B.S. Univ. Notre Dame 2005), Wilmington, Del.
Stephanie Ngoc Tu Nguyen (B.A. Stanford Univ. 2006), Katonah, N.Y.
Esi Wusiwa Nkyekyey (B.A. Bryn Mawr Coll. 2003), Accra, Ghana
Onyinye Ofor (A.B. Harvard Univ. 2005), Dix Hills, N.Y.
Christopher Painter (B.A. Case Western Reserve Univ. 2005), Pittsburgh, Pa.
Sotiria Palioura (B.S., M.S. Yale Univ. 2003), Lamia, Greece
Craig Daniel Platt (B.A. Univ. Pennsylvania 2002), Wyckoff, N.J.
Audrey Margaret Provenzano (B.A. Wellesley Coll. 2002), West Hartford, Conn.
Swapna Reddy (B.A. Univ. Pennsylvania 2004), Princeton, N.J.
Magdalena Maria Reyes (B.A. Univ. Pennsylvania 2005), Furlong, Pa.
Mariangela Rivera (B.S. SUNY [Stony Brook] 2004), Selden, N.Y.
Matthew Steven Rosenberg (A.B. Harvard Univ. 2002), New York, N.Y.
JoAnna Chandra Salmon (B.A. Univ. Virginia [Main Campus] 2003), Gainesville, Va.
Martina Trinese Sanders-Spight (B.A. Emory Univ. 2005), Detroit, Mich.
Sudipa Sarkar (B.A. Vanderbilt Univ. 2005), Memphis, Tenn.
David Scales (B.A. Univ. Pennsylvania 2001), Atlanta, Ga.
Joanna Jean Schatz (B.A. Mount Holyoke Coll. 2003), South Kingstown, R.I.
Mark Schlangel (B.A. Brandeis Univ. 2005), New Rochelle, N.Y.
David Charles Shield (B.A. Brown Univ. 2003), Seekonk, Mass.
Kamila Janetta Sikora (B.S. Univ. Southern California 2005), Centennial, Colo.
Daniel A. Solomon (B.A. Brown Univ. 2006), Weston, Conn.
Heather Korkosz Speller (B.A. Boston Coll. 2005), Belmont, Mass.
Vinita Takiar (B.A. Johns Hopkins Univ. 2003), Timonium, Md.
Carrie Thiessen (B.A. Yale Univ. 1998), Paramus, N.J.
Joshua William Trufant (B.A. Brown Univ. 1999), Brookline, Mass.
Dimitrios Nicolas Tsirigotis (B.S. McGill Univ. 2001), Montreal, Quebec, Canada
Aimee Marie Two (B.S. Brown Univ. 2005), Tempe, Ariz.
Matthew Vestal (B.A. Johns Hopkins Univ. 2004), Thornwood, N.J.
Nicholas Roger Villalon (B.A. Pomona Coll. 2004), Corrales, N.Mex.
David Anthony Wacker (B.S. Univ. Minnesota 2001; M.S. Cornell Univ. 2004; Ph.D. Cornell Univ. 2006), St. Paul, Minn.
Frederick Diing-Jye Wang (B.S. Massachusetts Inst. of Technology 2005), Parker, Tex.
Joshua Isaac Weiner (A.B. Harvard Univ. 2003), Scarsdale, N.Y.
Yvonne S. Yang (B.A. Yale Univ. 2000), Fresno, Calif.
Mia Yun Platt (B.S. Yale Univ. 1998), Lebanon, Pa.
Qi Zheng (B.A. Grinnell Coll. 2004), Shanghai, China

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Third-Year Class

Bibhav Acharya (B.S. Haverford Coll. 2006), Elm Hurst, N.Y.
Johannes Adomako-Mensah (B.A. Middlebury Coll. 2004), Accra, Ghana
Kofi-Buaku Atsina (B.S. Yale Univ. 2006), Saint Peters, Mo.
Kwame Bodor-Tsia Atsina (B.S. Lehigh Univ. 2007), Saint Peters, Mo.
Elie Rashid Balesh (A.B. Harvard Univ. 2007), El Paso, Tex.
Oliver Mullin Barry (A.B. Princeton Univ. 2005), New York, N.Y.
Christopher Bartley (B.S. Yale Univ. 2004), Brighton, Colo.
Ali Batouli (B.S. Stanford Univ. 2007), Falls Church, Va.
Isaac Benowitz (B.S. Columbia Univ. 2001), Newton, Mass.
Carl Thomas Berdahl (B.A. Univ. California [Los Angeles] 2007), Walnut Creek, Calif.
Ryan William Blum (A.B. Harvard Univ. 2004), New York, N.Y.
Jessica Dara Bod (B.A. CUNY Brooklyn Coll. 2006), Holliswood, N.Y.
Marko Boskovski (B.A. Washington Univ. in St. Louis 2007), Saint Louis, Mo.
Olatunde Ibu Kunoluwa Bosu (B.A. Univ. Southern California), Anaheim, Calif.
Kristel Lynn Carrington (B.S. Columbia Univ. 2007), Brooklyn, N.Y.
Tamara Yanique Carroll (B.A. Wesleyan Univ. 2007), West Haven, Conn.
Kesi Chen (B.A. Yale Univ. 2007), Pittsburgh, Pa.
Janet Ming-Shih Chiang (B.S., M.A., Univ. California [Los Angeles] 2004), Los Angeles, Calif.
Larissa Catherine Chiulli (B.A. Clark Univ. 2006), Cranston, R.I.
Panos George Christakis (B.S. Yale Univ. 2007), Toronto, Ontario, Canada
Anne Colleen Cooper (B.A. Univ. Notre Dame 2001; M.A. Univ. Essex 2004), Columbus, Ohio
Catherine Molina Dailey (B.A. Columbia Univ. 2006), Guilford, Conn.
Michael Christopher Dewan (B.S. Univ. Notre Dame 2007), Austin, Tex.
Daniel Rowe Duncan (B.S. Stanford Univ. 2007), New Haven, Conn.
Fayola Abebi Edwards (A.B. Harvard Univ. 2005), Central Islip, N.Y.
Hani M. Elwafi (B.A. Duke Univ. 1999), New Haven, Conn.
Macdale John Elwin (B.S. Rutgers Univ. [New Brunswick] 2007), New Haven, Conn.
Anna Kristine Engberg (B.A. Northwestern Univ. 2005), Fort Lauderdale, Fla.
Chikezie Ikechukwu Esconu (B.A. Harvard Univ. 2007), Midlothian, Va.
Ogechukwu Pearl Eze (B.S. Adelphi Univ. 2006; M.S. Adelphi Univ. 2007), Garden City, N.Y.
Devon Marc Fagel (B.A. Univ. California [Los Angeles] 1999; J.D. Southwestern Univ.
School of Law 2001), West Redding, Conn.
Olatokunbo Musili Famakinwa (A.B. Princeton Univ. 2005), West Babylon, N.Y.
Aaron Joshua Feinstein (B.A. Univ. Southern California 2006), Los Angeles, Calif.
Nupur Garg (B.S. Massachusetts Inst. of Technology 2007), Pace, Fla.
John Webster Gilbert (B.S. Duke Univ. 2007), Lexington, Ky.
Jose Luis Gonzalez (B.A. Johns Hopkins Univ. 2006), Miami, Fla.
Lauren Kathleen Graber (B.A. Wesleyan Univ. 2004), Minneapolis, Minn.
Lauren Allyson Hackney (B.A. Yale Univ. 2007), Orange, Conn.
Qingqing Han (B.S. Peking Univ. 2001; M.S. Yale Univ. 2005; Ph.D. Yale Univ. 2007), Beijing, China
Maya Anika Hasan (B.S. Massachusetts Inst. of Technology 2006; M.Eng. Massachusetts Inst. of Technology 2007), Larkspur, Calif.
Don Hoang (B.S. Stanford Univ. 2007), Northridge, Calif.
Bridget Leann Hopewell (B.S. Kansas State Univ. 2007), Topeka, Kans.
Omer Ibrahim (B.A., B.S. Univ. Cincinnati 2007), Cincinnati, Ohio
Aliya Zul Jiwani (A.B. Harvard Univ. 2005), Houston, Tex.
Melanie Elizabeth Johncilla (B.A. Swarthmore Coll. 2005), Petit Valley, Trinidad and Tobago
Tiffany Kae Jones (A.B. Harvard Univ. 2007), North Port, Fla.
Guson Kang (B.S. Stanford Univ. 2006), Palo Alto, Calif.
Adam Craig Kaufman (B.A. Columbia Univ. 2007), Jericho, N.Y.
Hadiza Shu’Aib Kazaure (B.S. Temple Univ. 2007), Vienna, Va.
Derek Brian Kennedy (B.A. Duke Univ. 2005; M.A. Loyola Marymount Univ. 2007), Fayetteville, N.Y.
Narae Ko (B.A. Amherst Coll. 2006), Seoul, Korea
Andrew Joshua Kobets (B.A. Johns Hopkins Univ. 2006), Fresh Meadows, N.Y.
Caitlin Eileen Koerber (B.A. Swarthmore Coll. 2007), New Orleans, La.
Matthew Reid Kruse (B.A. Carleton Coll. 2005), Fitchburg, Wis.
Lewei Lin (B.S. Massachusetts Inst. of Technology 2005), Somerville, Mass.
William Michael Lin (A.B., M.A. Harvard Univ. 2006), East Amherst, N.Y.
Margaret Forbes Reynolds May (B.A. Stanford Univ. 2004), Portland, Oreg.
Badri Gunvant Modi (B.A., B.S., Emory Univ. 2007), El Dorado, Ariz.
Adrian Jose Mora (B.S. United States Naval Acad. 2007), Lakeland, Fla.
Michelle Morales (B.S. California State Univ. [Los Angeles] 2007), Alhambra, Calif.
Joshua Ethan Motelow (B.A. Yale Univ. 2006), New York, N.Y.
Kim Thuy Nguyen (A.B. Harvard Univ. 2006), Fremont, Calif.
Nina Ni (A.B. Harvard Univ. 2005), Livingston, N.J.
Manish Suresh Noticewala (B.S. New York Univ. 2007), Brooklyn, N.Y.
Brandon O. Ogbunugafor (B.S. Howard Univ. 2002), Yonkers, N.Y.
Steven Changsuk Oh (B.S. Yale Univ. 2006), Portland, Ore.
Daniel Andrew Okin (B.S. Columbia Univ. 2007), New York, N.Y.
Henry Soo-Min Park (B.A., B.S., Yale Univ. 2007), Warren, N.J.
Patricia Rose Peter (B.A. Columbia Univ. 2007), Freehold, N.J.
Can Qian (B.S. Stanford Univ. 2007), Alpharetta, Ga.
Odayme Quesada (B.S. Univ. Florida 2007), Miami, Fla.
Jocelyn Carmen Ronda (B.A. Columbia Univ. 2006), Accord, N.Y.
Lara Elise Rosenbaum (B.S. Massachusetts Inst. of Technology 2007), Midlothian, Va.
Robert James Ross (B.S. Univ. Florida 2005), Rockledge, Fla.
Rajendra Fernando Sawh-Martinez (B.S. New York Univ. 2005), Lakeland, Fla.
Marie Ann Schaefer (B.A. Ohio Wesleyan Univ. 2007), Broadview Heights, Ohio
Jonathan Hale Season (B.S. Yale Univ. 2006), Cos Cob, Conn.
Lin Shen (B.A. Stanford Univ. 2005), Palo Alto, Calif.
Alla Vickery Les Smith (B.A. Bowdoin Coll. 2006), Annapolis, Md.
Prathap Sooriyakumaran (B.A. Univ. California [Berkeley] 2004), San Jose, Calif.
Michael Carlton Soule (B.A. Brown Univ. 2006), Evanston, Ill.
Chantae Sharee Sullivan (B.A. Amherst Coll. 2007), Montego Bay, N.Y.
John Michael Thomas (B.A., B.S. Univ. Dayton 2007), Oregonia, Ohio
Sonya Thomas (B.A. Columbia Univ. 2007), Woodbridge, Conn.
Amanda Erin Velazquez (B.A., B.S. Southern Methodist Univ. 2005), Houston, Tex.
Ruth Wangechi Wang’ondu (B.A. Wellesley Coll. 2007), New Haven, Conn.
Grace Waruchu Wanjiku (B.A. Wellesley Coll. 2006), Thika, Kenya
Kathryn Emily Wynne (B.A. Cornell Univ. 2007), Easton, Conn.
Tzu-I Jonathan Yang (B.S. Univ North Carolina 2003), Kaohsiung City, Taiwan

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Second-Year Class

Lisa Mee-Hyun An (B.S. Massachusetts Inst. of Technology 2005), Springfield, Va.
Joshua Kah-Wor Au (B.S. Yale Univ. 2008), Miami, Fla.
Woong Hwan Bae (A.B. Harvard Univ. 2008), Brea, Calif.
Joel Beckett (B.A. Kenyon Coll. 2008), Mount Vernon, Ohio
John Christopher Binford (B.S. Univ. Georgia 2007), Louisville, Ky.
Benjamin Neil Blond (B.A. Amherst Coll. 2008), Syosset, N.Y.
Jocelyn Leigh Bosco (B.S. Cornell Univ. 2006), Glastonbury, Conn.
Ellen Rachel Bradley (B.A. Stanford Univ. 2003), New York, N.Y.
Xuejing Chen (B.S. California Coll. of Technology 2003; M.S. Carnegie Mellon Univ. 2007), Broken Arrow, Okla.
Raj Jitendra Chovatiya (B.S. Univ. Pittsburgh 2008), Libertyville, Ill.
Victoria Elizabeth Clark (A.B. Harvard Univ. 2008), Waycross, Ga.
Alessandro Roberto De Camilli (B.A. New York Univ. 2007), Guilford, Conn.
Deepali Dhar (B.S. Yale Univ. 2007), Wayne, N.J.
Stephanie Raye Douglas (B.A. Vanderbilt Univ. 2007), Nicholasville, Ky.
Chineme Ijoma Enyioha (B.S. William Carey Coll. 2008), Hattiesburg, Miss.
Kelly Jean Fitzgerald (B.S. Boston Coll. 2008), Upton, Mass.
Valerie A. Flores (B.S. Univ. Southern California 2008), Rancho Cucamonga, Calif.
Amy Kathleen Forrestel (B.S. Univ. Florida 2007), Tampa, Fla.
Jonathan Fu (B.S. Massachusetts Inst. of Technology 2008), Duluth, Ga.
Jeffrey Scott Futterleib (B.S. Univ. Connecticut 2008), Canton, Conn.
Samrawit A Goshu (B.S. Loyola Univ. Chicago 2008), Chicago, Ill.
Ramy Said Goueli (B.S. Michigan State Univ. 2008), Fitchburg, Wis.

Alisse K. Hauspurg (B.A. Univ. Pennsylvania 2008), Bridgewater, N.J.
Hsi-En Ho (B.S. McGill Univ. 2007), Taiwan, Republic of China
Ken Yon Hui (B.S., M.S. Yale Univ. 2008), Indianapolis, Ind.
Adelina Hung (B.A. Columbia Univ. 2008), Ozone Park, N.Y.
Joshua William Hustedt (B.A. Stanford Univ. 2008), Sandy, Utah
Jeremy Bradley Jacox (B.S. Massachusetts Inst. of Technology 2008), Kaysville, Utah
Rachel Anne Jamison (B.S. Yale Univ. 2008), Hamden, Conn.

Soledad Jorge (A.B. Harvard Univ. 2007), Iowa City, Iowa
Michelle Therssen Joy (B.S. Brown Univ. 2007), Lighthouse Point, Fla.
Brian Lee Ju (B.S. Yale Univ. 2008), Bellaire, Tex.
Stacey Michelle Kallem (B.A. Stanford Univ. 2007), Plainview, N.Y.
Kevin Koo (A.B. Harvard Univ. 2007; M.Phil. Univ. Cambridge 2008), Nashua, N.H.
Gregory August Kuzmik (B.A. Cornell Univ. 2008), McLean, Va.
Esther Sunkyung Lee (A.B. Princeton Univ. 2008), La Mirada, Calif.
Joshua Caleb Leinwand (B.S. CUNY-Brooklyn Coll. 2008), Brooklyn, N.Y.
Rachel Lentz (B.A. Yale Univ. 2007), Short Hills, N.J.
Jonathan Craig Levin (B.S. Brown Univ. 2008), East Meadow, N.Y.
Kristina Jing Liu (A.B. Harvard Univ. 2008), Mason, Ohio
Julia Rose Lubesen (A.B. Harvard Univ. 2007), Oak Hill, Va.
Tejas Chandrakant Manchandia (B.A., B.S. Rice Univ. 2008), Chino Hills, Calif.
Alexandria Concetta Marino (B.A. Yale Univ. 2005), Bridgeport, Conn.
Alexander George Marzuka (B.S. Univ. Texas [Austin] 2008), Sugar Land, Tex.
Nicole Ali McNeer (A.B. Harvard Univ. 2008), Mendota Heights, Minn.
John Devin Millet (B.A. Oberlin Coll. 2001), Pittsford, N.Y.
Regina Maree Myers (B.S. Cornell Univ. 2008), Bayside, N.Y.
Eberechi Nkele Nwogu (B.A. CUNY Lehman Coll. 2007), Bronx, N.Y.
Alyssa Nicole Nylander (A.B. Harvard Univ. 2008), Pleasanton, Calif.
Julius Thomas Oatts (B.S. Emory Univ. 2008), Aurora, Colo.
Charles A Odonkor (B.S. Univ. of the South 2006), Saint Louis, Mo.
Oluwatosin Oluwafunke Onibokun (B.S. Rutgers Univ. [New Brunswick] 2008),
   Ibadan, Oyo State, Md.
Michael Joseph Peluso (B.A. Columbia Univ. 2007; M.Phil. Univ. Cambridge 2008),
   Floral Park, N.Y.
Curtis Carmean Perry (B.S. Yale Univ. 2007), Cambridge, Mass.
Warren Maurice Perry (B.S. North Carolina State Univ. [Raleigh] 2008), Wendell,
   N.C.
Tammi-Marie Krystal Phillip (B.A. Johns Hopkins Univ. 2008), Castrries, Saint Lucia
Crystal Lynne Piper (B.A. Smith Coll. 2005; M.S. Rensselaer Polytechnic Inst. 2008),
   Simsbury, Conn.
Carina Preskill (B.A. Brown Univ. 2007), Arcadia, Calif.
Kavita Radhakrishnan (B.S. Massachusetts Inst. of Technology 2006), Fremont, Calif.
Alexandra Marie Ristow (B.A. Claremont Mckenna Coll. 2008), Columbia, Mo.
Brian James Rosenberg (A.B. Harvard Univ. 2008), Rye Brook, N.Y.
Talia Judith Rosenberg (A.B. Harvard Univ. 2006), Pittsburgh, Pa.
Dionne Marie Rudison (B.S. Xavier Univ. Louisiana 2006), New Orleans, La.
Ferrin Katarina Ruiz (B.A. Scripps Coll. 2008), Seal Beach, Calif.
Kyan Cyrus Safavi (B.S. Yale Univ. 2008), Shaker Heights, Ohio
Adam Sang (A.B. Harvard Univ. 2008), Staten Island, N.Y.
Amy Rachel Schoenfeld (A.B. Harvard Univ. 2007), Woodbridge, Conn.
Sounok Sen (B.S. Univ. Pennsylvania 2007), Laurel, Md.
Whitney Allison Sheen (B.S. Bates Coll. 2005; M.S. Johns Hopkins Univ. 2008),
   Flagstaff, Ariz.
Sameer Sheth (B.S. Yale Univ. 2007), Westbrook, Conn.
David Cole Shisler (B.S. Vanderbilt Univ. 2008), Kingsport, Tenn.
Adam Shoffner (B.S. Univ. Kansas 2006), Derby, Kans.
Jordan Avery Sloshower (B.S. Univ. Winnipeg 2005; M.S. Univ. Edinburgh 2007),
   Winnipeg, Manitoba, Canada
Daniel Hai-Dang Tran (B.S. Univ. California [Irvine] 2006), Santa Ana, Calif.
Gerardo Trejo (B.S. Massachusetts Inst. of Technology 2007), Houston, Tex.
Tave Annamey Van Zyl (A.B. Harvard Univ. 2008), Kingston, Ontario, Canada
Anant Vasudevan (B.S. Stanford Univ. 2007), Marietta, Ga.
Molly Miranda Weiner (B.A. Barnard Coll. 2007), New Haven, Conn.
Rany Woo (B.S. Massachusetts Inst. of Technology 2008), Fayetteville, N.C.
Catherine Sheng Yu Yang (B.A. Cornell Univ. 2008), Richmond, British Columbia,
   Canada
Nazlee Zebardast (B.S. Univ. Toronto 2007; M.S. Univ. Toronto 2008), Richmond Hill, Ontario, Canada
Ze Zhang (B.A., B.S. Univ. Southern California 2008), West Henrietta, N.Y.
Rocksheng Zhong (A.B. Harvard Univ. 2008), Staten Island, N.Y.

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First-Year Class

Rahul Agarwal (B.A. Johns Hopkins Univ. 2009), Edison, N.J.
Michael Drake Alpert (B.A. Yale Univ. 2007), Ellicott City, Md.
Chethan Bachireddy (A.B. Harvard Univ. 2008), Lufkin, Tex.
Xiao Bai (B.A. Yale Univ. 2008), Shanghai, China
Alexander Reza Bazazi (B.A. Boston Univ. 2008), Higganum, Conn.
Elyssa Berg (B.A. Yale Univ. 2004), North Bellmore, N.Y.
Jessica Ashley Berger (A.B. Harvard Univ. 2008), Bayside, N.Y.
Emily Marie Bucholz (B.S., M.P.H. Yale Univ. 2008), Irving, Tex.
Rafael Antonio Buerba Siller (A.B. Harvard Univ. 2008), Phoenix, Ariz.
Neel Mahendra Butala (A.B. Harvard Univ. 2009), Knoxville, Tenn.
Siobhan Mary Case (B.A. Stanford Univ. 2008), Bellevue, Wash.
Katherine H. Chau (A.B. Harvard Univ. 2009), Whitestone, N.Y.
Michelle Mizhi Chen (B.A. Dartmouth Coll. 2008), Eden Prairie, Minn.
Ruijun Chen (B.A. Duke Univ. 2009), Richardson, Tex.
Ethan Wesley Dean (B.S. Univ. Georgia 2009), Comer, Ga.
Asiri Saumya Ediriwickrema (B.S. Massachusetts Inst. of Technology 2008), Cary, N.C.
Hao Feng (B.A. Univ. California [Berkeley] 2009), Santa Maria, Calif.
Dinah Foer (B.A. Yale Univ. 2004), New York, N.Y.
Suzanne Jaqueth Forrest (B.A. Wellesley Coll. 2006), New Haven, Conn.
Marianna Freudzon (B.S. Univ. Connecticut 2006), West Hartford, Conn.
Michael Fu (B.S. Columbia Univ. 2009), Toronto, Ontario, Canada
Matthew Scoutt Garner (B.A. Dartmouth Coll. 2007), Cheshire, Conn.
Vladimir Vladislav Glinkski (B.S. Harvard Univ. 2009), Columbia, Mo.
Sarah Elizabeth Goss (B.S. United States Military Acad. 2009), Lancaster, Pa.
Simon Matthew Gray (B.S. Univ. Maryland 2008; M.Phil. Univ. Cambridge 2009), Towson, Md.
Wei Gui (B.S. Cornell Univ. 2009), Temecula, Calif.
Farhaan Hafeez (B.A., M.S. Univ. Pennsylvania 2009), Valparaiso, Ind.
Lewis Dirk Hahn (A.B. Harvard Univ. 2008), Woodbridge, Conn.
Peter Hashim (B.A. Cornell Univ. 2008), Branford, Conn.
Amanda Lynn Hernandez (B.A. Columbia Univ. 2008), New York, N.Y.
Brendan Huang (B.A. Dartmouth Coll. 2008), South Pasadena, Calif.
Jing Huang (B.S. Yale Univ. 2009), Rego Park, N.Y.
Laura Huang (B.A. Wellesley Coll. 2009), Warren, N.J.
Madison Morgan Hustedt (B.S. Brigham Young Univ. 2008), Salt Lake City, Utah
Jacob Michael Izenberg (B.A. Brown Univ. 2008), Ann Arbor, Mich.
Haben Fessehaie Kefella (B.A. Boston Univ. 2007), Boston, Mass.
Dhruv Khullar (B.S. Yale Univ. 2009), Canton, Ohio
Maria Beth Koenigs (B.A. Bowdoin Coll. 2009), Longmeadow, Mass.
Whitney Leigh Mc Gillin Kress (A.B. Harvard Univ. 2008), Chevy Chase, Md.
Vivek Tammaji Kulkarni (B.A. Washington Univ. 2009), Burr Ridge, Ill.
Eric Kuo (B.S. Univ. Southern California 2009), San Marino, Calif.
Timothy Dexter Law (B.S. Johns Hopkins Univ. 2009), San Marino, Calif.
Felicit Madeleine B. Lenes (B.S. Univ. Texas 2009), Mt. Pleasant, S.C.
Alice Yang Li (B.S. Univ. Toronto 2009), Windsor, Ontario, Canada
Elise Gao Liu (B.S. Massachusetts Inst. of Technology 2009), Cambridge, Mass.
Lucinda S Liu (B.A. Dartmouth Coll. 2009), Menomonee Falls, Wis.
Jean Manuel Lopez (B.A. Yale Univ. 2008), Augusta, Ga.
Daniel Yang Lu (B.S. Brown Univ. 2009), Darien, Conn.
Mark Vu Mai (B.A. Swarthmore Coll. 2009), Holmes, Pa.
Sarah Mallik (B.S. SUNY [Stony Brook] 2009), Woodmere, N.Y.
Charisse Laura Mandimika (B.S. Denison Univ. 2009), Harare, Zimbabwe
Leisel Samantha Martin (B.S. Towson Univ. 2005), Barataria, Port of Spain, Trinidad and Tobago
Stephanie Michelle Meller (B.A. Cornell Univ. 2009), West Orange, N.J.
Amy Catherine Moreno (B.A. Rice Univ. 2009), Katy, Tex.
Maria Francesca Nardell (A.B. Harvard Univ. 2006), Newtonville, Mass.
Ebelechukwu Agaegbu Odiari (B.S. CUNY City Coll. 2006), Far Rockaway, N.Y.
Oluwarotimi Sewedo Okunade (B.S. Harvard Univ. 2007), Cincinnati, Ohio
Caroline Ong (B.A. Wellesley Coll. 2007), Bayan Lepas, Penang, Malaysia
Micaela Bea Owusu (A.B. Harvard Univ. 2007; M.S. Univ. Oxford 2009), Houston, Texas
Aniruddh Pradip Patel (B.A. Washington Univ. 2009), Indianapolis, Ind.
Jovana Pavisic (B.S. Duke Univ. 2009), San Jose, Calif.
Nathan Pirakitikulr (B.A. Columbia Univ. 2009), Crown Point, Ind.
Kyle Thomas Ragins (B.A. Claremont McKenna Coll. 2009), Torrance, Calif.
Marco Antonio Ramos (B.A. Columbia Univ. 2007), Shreveport, La.
Elizabeth York Rawson (B.A. Yale Univ. 2007), Bethesda, Md.  
Graeme Michael Rosenberg (B.A. Middlebury Coll. 2009), Wilson, Wyo.  
Christopher Mark Sauer (B.A. Columbia Univ. 2008), Saddle River, N.J.  
Ameya Vinod Save (B.S. Emory Univ. 2008), Longwood, Fla.  
Irina Shklyar (B.S. Massachusetts Inst. of Technology 2009), Sherman Oaks, Calif.  
Lydia Lee Shook (B.A. Yale Univ. 2007), Harvard, Mass.  
Andrew Howard Smith (B.A. Northwestern Univ. 2004), Shaker Heights, Ohio  
Justin Matthew Steinberg (B.A. Carleton Coll. 1993; M.B.A. Univ. Chicago 2001), Chicago, Ill.  
Garth William Strohbehn (B.A., B.S. Univ. Iowa 2008), Boone, Iowa  
Gloria Rayshine Sue (B.A., M.A. Johns Hopkins Univ. 2009), San Jose, Calif.  
Eleanor Varian Thomas (B.A., B.S. Brown Univ. 2007), Auburn, Ala.  
Nathan Chin-Yau Tu (A.B. Harvard Univ. 2009), Loudonville, N.Y.  
Brooks Van Udelsman (B.A. Williams Coll. 2009), Woodbridge, Conn.  
Daniel Freedman Weisberg (B.A. Brown Univ. 2008), Palisades, N.Y.  
Margaret Elizabeth Whicker (B.A. Dartmouth Coll. 2008), Potomac, Md.  
Theresa Lynn Williamson (B.S. Yale Univ. 2009), Bensalem, Pa.  
Daniel James Wong (B.A. Williams Coll. 2008), Portland, Oreg.  
Mikell Margaret Yuhasz (B.A. Case Western Reserve Univ. 2008), Boca Raton, Fla.  
Samir Zaidi (B.S. Massachusetts Inst. of Technology 2009), Bronx, N.Y.  
Bingnan Zhang (B.S. McGill Univ. 2009), Verdun, Canada  
Bixiao Zhao (A.B. Princeton Univ. 2009), Plainsboro, N.J.  

Total, 99

Extended Study—M.D. and M.D./Ph.D. Programs

Akua Adu-Boahene (B.S. Massachusetts Inst. of Technology 2006), Decatur, Ga.  
Feras Akbik (B.S. Emory Univ. 2005), Atlanta, Ga.  
Jacob Stuart Appelbaum (B.A. Amherst Coll. 2003), Seattle, Wash.  
Daniel Michael Balkin (B.A. Northwestern Univ. 2004), Madison, Wis.  
Danielle Helen Barber (B.S. Massachusetts Inst. of Technology 2003), Penn Valley, Pa.  
Jonathan Philip Belman (B.S. Pennsylvania State Univ. 2004), Pine Brook, N.J.  
Adriana Blakaj (B.S. Yale Univ. 2004), Hamden, Conn.  
Nicole Christine Cabbad (B.S. Univ. Texas [Dallas] 2006), New Haven, Conn.  
Allison Marie Campbell (B.A. Amherst Coll. 2005), Salt Lake City, Utah  
Noah Alexander Capurso (B.A. Williams Coll. 2005), Hastings-on-Hudson, N.Y.  
Jonathan Howard Chen (B.S. Univ. Chicago 2003), Barrington, Ill.  
Sara Eve Crager (B.A. McGill Univ. 2005), Denver, Colo.  
Jessica Lynn Crawford (B.A. Duke Univ. 2003), Oceanport, N.J.  
Eyiyemisi Cynthia Damisah (B.S. Biola Univ. 2005), Brea, Calif.
Dylan Frances Davey (B.S. Yale Univ. 2005), Bethesda, Md.
Amanda Vict Zeta De La Paz (B.A. Wesleyan Univ. 2004), Marikina City, Philippines
Tyler John Dodds (B.S. Haverford Coll. 2006), Wilton, Conn.
Martin Hoeller Dominguez (B.S. Yale Univ. 2005), Indianapolis, Ind.
Tyler Seth Durazzo (B.S. Yale Univ. 2005), Hamden, Conn.
Louis E. Fazen (B.A. Brown Univ. 2002), Southboro, Mass.
Corey Scott Frucht (B.S., M.S. Brandeis Univ. 2004), Bullville, N.Y.
Thomas John Gniadek (B.S. Yale Univ. 2002), Cheshire, Conn.
Ava Golchin (B.A. Washington Univ. 2004), Ames, Iowa
Kseniya Golubets (B.A. CUNY Queens Coll. 2005), Richmond Hill, N.Y.
Jamie Keiko Nicole Harrington (B.A. Univ. California [Berkeley] 2005),
Longview, Tex.
Brady John Heward (B.S. Brigham Young Univ. 2005), Orem, Utah
Brandon Paul Hirsch (B.S. Emory Univ. 2006), Commack, N.Y.
Barbara Ann Hirschman (B.A. Macalester Coll. 2006), Winterset, Iowa
Sze Chun Wi Ho (B.S. Yale Univ. 2006), Hong Kong, China
Eric Alan Huebner (B.S. Univ. Washington 2003), Bellevue, Wash.
Scott Ronald Hunter (B.A. Columbia Univ. 2003), San Diego, Calif.
Terri Quan Huynh (B.A. Univ. California [Berkeley] 2006), Dublin, Calif.
Kenneth E. Ike (B.A. Baylor Univ. 2008), Houston, Tex.
Kolawole Tony Jegede (B.S. SUNY [Albany] 2006), Brooklyn, N.Y.
Zahir Kanjee (A.B. Princeton Univ. 2006), Oakville, Ontario, Canada
Stephen Patrick Kelleher (B.A. Williams Coll. 2005), Waterville, Maine
Srdan Kobsa (B.S. Drake Univ. 2003), Zagreb, Croatia
Maya Evelyn Kotas (B.S. Yale Univ. 2005), Ithaca, N.Y.
Alicia Joan Little (B.A. Amherst Coll. 2004), Kingston, R.I.
James Seiken Martenson (B.A. Northwestern Univ. 2006), Rochester, Minn.
Lionel Sennacherib McIntosh (B.A. Johns Hopkins Univ. 2005), Freeport, Grand Bahamas, Bahamas
Dane Kieran Mejias (B.A. Yale Univ. 2006), St. James, Trinidad and Tobago
David Michael Merrick (B.S. Johns Hopkins Univ. 2003), Beaverton, Oreg.
Alexandra Michelle Miller (B.A. Yale Univ. 2002), New York, N.Y.
Matthew Mark Miller (B.S. Univ. Utah 2002), Farmington, Utah
Alexander Gharib Nazem (B.S. Yale Univ. 2004), New York, N.Y.
Charisse Marie Orme (B.S. Univ. California [Davis] 2001), Huntington Beach, Calif.
Ann Caroline Raldow (A.B. Princeton Univ. 2005), Princeton, N.J.
Murphy, N.C.
Ontario, Canada
Jonathan Conrad Romanysyn (B.A. Yale Univ. 2004), Houston, Tex.
Frederick William Romberg (B.S. Virginia Polytechnic Univ. 1995; M.S. California
Inst. of Technology 2000), La Canada, Calif.
Rachel Kushner Rosenstein (A.B. Princeton Univ. 2005), Far Hills, N.J.
Jill Carol Rubinstein (B.A. Yale Univ. 1999; M.S. Stockholm Univ. 2004; M.S. Yale
Univ. 2006), Buffalog, N.Y.
Amy Akella Sarma (B.A. Yale Univ. 2006), Farmington, Conn.
Benjamin Andrew Savitch (B.S. Arizona State Univ. 2005), Snohomish, Wash.
Sachin Jatin Shah (B.S. Brown Univ. 2005), Edison, N.J.
Debra Anne Smith (B.S. Cornell Univ. 2003), Ithaca, N.Y.
Natalie Spicyn (B.S. Yale Univ. 2005), Brooklyn, N.Y.
Juliana Tolles (A.B. Harvard Univ. 2005), Edina, Minn.
Whitney Lynn Tolpinrud (B.A. Univ. San Diego 2005), Salt Lake City, Utah
Laura Kate Tom (B.S. Lehigh Univ. 2006), Yakima, Wash.
Charles Thompson Tuggle (B.S. Univ. Georgia 2005), Memphis, Tenn.
Katherine Elizabeth Uyhazi (B.S. Coll. New Jersey 2005), Lawrenceville, N.J.
Ellen Marie Vollmers (B.S. Tulane Univ. [Louisiana] 2004), Old Town, Maine
Judah David Weathers (B.S. Northeastern Univ. 2004), Haverhill, Mass.
Cicely Ann Williams (B.A. Univ. Virginia 2001), Knoxville, Tenn.
Ernest John Wright (B.S. Univ. California [Irvine] 2006), San Jose, Calif.
Julie Mae Xanthopoulos (B.S. Lafayette Coll. 2004), Lewistown, Pa.
Qing Yang (B.S. Yale Univ. 2006), Pittsburgh, Pa.
Rashele Patrice Yarborough (B.S. Howard Univ. 2004), Cumberland, R.I.
Hiromi Yoshida (B.S. Yale Univ. 2006), La Jolla, Calif.
Benjamin Zabar (B.A. Dartmouth Coll. 2004), New York, N.Y.

Total, 88

REGISTERED FOR THE COMBINED
M.D./PH.D. DEGREE

Feras Akbik (B.S. Emory Univ. 2005), Atlanta, Ga.
Nancy Christine Allen (B.S. Univ. California [Los Angeles] 2005), San Francisco,
Calif.
Jacob Stuart Applebaum (B.A. Amherst Coll. 2003), Seattle, Wash.
Enrollment

Daniel Michael Balkin (B.A. Northwestern Univ. 2004), Madison, Wis.
Danielle Guez Barber (B.S. Massachusetts Inst. of Technology 2003), Penn Valley, Pa.
Christopher Bartley (B.S. Yale Univ. 2004), Brighton, Colo.
Jonathan Philip Belman (B.S. Pennsylvania State Univ. 2004), Pine Brook, N.J.
Wenya Linda Bi (A.B., M.A. Harvard Univ. 2002), Gaithersburg, Md.
Adriana Blakaj (B.S. Yale Univ. 2004), Hamden, Conn.
Emily Marie Bucholz (B.S., M.P.H. Yale Univ. 2008), Irving, Tex.
Allison Marie Campbell (B.A. Amherst Coll. 2003), Salt Lake City, Utah
Allison Fitzgerald Carey (B.S. Pennsylvania State Univ. 2002), Pittsburgh, Pa.
Jonathan Howard Chen (B.S. Univ. Chicago 2003), Barrington, Ill.
Joanna Y. Chin (A.B. Harvard Univ. 1999), Brooklyn, N.Y.
Raj Jitendra Chovatiya (B.S. Univ. Pittsburgh 2008), Libertyville, Ill.
Victoria Elizabeth Clark (A.B. Harvard Univ. 2008), Waycross, Ga.
Sara Eve Crager (B.A. McGill Univ. 2005), Denver, Colo.
Dylan Frances Davey (B.S. Yale Univ. 2005), Bethesda, Md.
Martin Hoeller Dominguez (B.S. Yale Univ. 2005), Indianapolis, Ind.
Fayola Abebi Edwards (A.B. Harvard Univ. 2005), Central Islip, N.Y.
Dario Joseph Englot (B.S. Univ. Scranton 2003), Swoyersville, Pa.
Louis E. Fazen (B.A. Brown Univ. 2002), Southboro, Mass.
Kelly Jean Fitzgerald (B.S. Boston Coll. 2008), Upton, Mass.
Corey Scott Frucht (B.S., M.S. Brandeis Univ. 2004), Bullville, N.Y.
Samir Gautam (B.A. Boston Coll. 2006), Lyme, Conn.
Thomas John Gniadek (B.S. Yale Univ. 2002), Cheshire, Conn.
Simon Matthew Gray (B.S. Univ. Maryland 2008; M.Phil. Univ. Cambridge 2009),
Towson, Md.
Barbara Ann Hirschman (B.A. Macalester Coll. 2006), Winter set, Iowa
Eric Alan Huebner (B.S. Univ. Washington 2003), Bellevue, Wash.
Ken Yon Hui (B.S., M.S. Yale Univ. 2008), Indianapolis, Ind.
Jeremy Bradley Jacox (B.S. Massachusetts Inst. of Technology 2008), Kaysville, Utah
Rachel Anne Jamison (B.S. Yale Univ. 2008), Hamden, Conn.
Maya Meltzer Kasowski (B.A. Univ. Pennsylvania 1999; M.M.P. Univ. Pennsylvania
2004), West Chester, Pa.
Srdan Kobsa (B.S. Drake Univ. 2003), Zagreb, Croatia
Maya Evelyn Kotas (B.S. Yale Univ. 2005), Ithaca, N.Y.
Alicia Joan Little (B.A. Amherst Coll. 2004), Kingston, R.I.
Alexandria Concetta Marino (B.A. Yale Univ. 2005), Bridgeport, Conn.
Cambridge 2003), Davis, Calif.
Nicole Ali McNeer (A.B. Harvard Univ. 2008), Mendota Heights, Minn.
David Michael Merrick (B.S Johns Hopkins Univ. 2003), Beaverton, Oreg.
Alexandra Michelle Miller (B.A. Yale Univ. 2002), New York, N.Y.
Matthew Mark Miller (B.S. Univ. Utah 2002), Farmington, Utah
Joshua Ethan Motelow (B.A. Yale Univ. 2006), New York, N.Y.
Alyssa Nicole Nylander (A.B. Harvard Univ. 2008), Pleasanton, Calif.
Brandon O. Ogbunugafor (B.S. Howard Univ. 2002), Yonkers, N.Y.
Daniel Andrew Okin (B.S. Columbia Univ. 2007), New York, N.Y.
Charisse Marie Orme (B.S. Univ. California [Davis] 2001), Huntington Beach, Calif.
Sotiria Palioura (B.S., M.S. Yale Univ. 2003), Lamia, Greece
Curtis Carmean Perry (B.S. Yale Univ. 2007), Cambridge, Mass.
Nathan Pirakitikulr (B.A. Columbia Univ. 2009), Crown Point, Ind.
Craig Daniel Platt (B.A. Univ. Pennsylvania 2002), Wyckoff, N.J.
Marco Antonio Ramos (B.A. Columbia Univ. 2007), Shreveport, La.
Saif Shafique Rathore (B.A. Cornell Univ. 1996; M.O. Univ. North Carolina 2000),
Ontario, Canada
Brian James Rosenberg (A.B. Harvard Univ. 2008), Rye Brook, N.Y.
Rachel Kushner Rosenberg (A.B. Princeton Univ. 2005), Far Hills, N.J.
Robert James Ross (B.S. Univ. Florida 2005), Rockledge, Fla.
Jill Carol Rubinstein (B.A. Yale Univ. 1999; M.S. Stockholm Univ. 2004; M.S. Yale
Univ. 2006), Buffalo, N.Y.
David Scales (B.A. Univ. Pennsylvania 2001), Atlanta, Ga.
Vinita Takiar (B.A. Johns Hopkins Univ. 2003), Timonium, Md.
Carrie Thiessen (B.A. Yale Univ. 1998), Paramus, N.J.
Eleanor Varian Thomas (B.A., B.S. Brown Univ. 2007), Auburn, Ala.
Dimitrios Nicolas Tsirigotis (B.S. McGill Univ. 2001), Montreal, Quebec, Canada
Katherine Elizabeth Uyhazi (B.S. Coll. New Jersey 2005), Lawrenceville, N.J.
Ellen Marie Vollmers (B.S. Tulane Univ. 2004), Old Town, Maine
Ruth Wangechi Wang’ondu (B.A. Wellesley Coll. 2007), Newton, Conn.
Judah David Weathers (B.S. Northeastern Univ. 2004), Haverhill, Mass.
Cicely Ann Williams (B.A. Univ. Virginia 2001), Knoxville, Tenn.
Julie Mac Xanthopoulos (B.S. Lafayette Coll. 2004), Lewiston, Pa.
Qing Yang (B.S. Yale Univ. 2006), Pittsburgh, Pa.
Yvonne S. Yang (B.A. Yale Univ. 2000), Fresno, Calif.
Rashele Patrice Yarborough (B.S. Howard Univ. 2004), Cumberland, R.I.
Mia Yun Platt (B.S. Yale Univ. 1998), Lebanon, Pa.
Samir Zaidi (B.S. Massachusetts Inst. of Technology 2009), Bronx, N.Y.
Bixiao Zhao (A.B. Princeton Univ. 2009), Plainsboro, N.J.

Total, 88
REGISTERED FOR THE COMBINED
M.D./M.H.S. DEGREE

Noah Alexander Capuro (B.A. Williams Coll. 2005), Hastings-on-Hudson, N.Y.
Kseniya Golubets (B.A. CUNY Queens Coll. 2005), Richmond Hill, N.Y.
Kolawole Tony Jegede (B.S. SUNY [Albany] 2006), Brooklyn, N.Y.
Lionel Sennacherib McIntosh (B.A. Johns Hopkins Univ. 2005), Freeport, Grand Bahamas, Bahamas
Jonathan Conrad Romanyszyn (B.A. Yale Univ. 2004), Houston, Tex.
Amy Akella Sarma (B.A. Yale Univ. 2006), Farmington, Conn.
Natalie Spicyn (B.S. Yale Univ. 2005), Brooklyn, N.Y.
Juliana Tolles (A.B. Harvard Univ. 2005), Edina, Minn.
Charles Thompson Tuggle (B.S. Univ. Georgia 2005), Memphis, Tenn.

Total, 11

REGISTERED FOR THE COMBINED
M.D./M.B.A. DEGREE

Nicole Christine Cabbad (B.S. Univ. Texas [Dallas] 2006), New Haven, Conn.
Hiromi Yoshida (B.S. Yale Univ. 2006), La Jolla, Calif.

Total, 4

REGISTERED FOR THE
PHYSICIAN ASSOCIATE PROGRAM

Third-Year Class

Jessica Dale Beer (B.A. Univ. Puget Sound 1999), Denver, Colo.
Nicholas Francis Bonomo (B.S. Stonehill Coll. 2006), Orange, Conn.
Emily Jeanne-Marie Burgun (B.S. Wake Forest Univ. 2006), Newark, Del.
Carolyn Marie Canonica (B.S. Fairfield Univ. 2005), Franklin Square, N.Y.
Dominique Marie Caruso (B.S. Georgetown Univ. 2007), North Andover, Mass.
Anton Robert Cherry (B.S. Univ. Toronto 1995; D.C. Logan Coll. of Chiropractic 1998), Newmarket, Ontario
Christine Catherine Georgiadis (B.S. Rutgers Univ. 2004; M.S. Drexel Univ. 2007),
Kinnelon, N.J.
Krista Marie Hanson (B.S. Univ. Wisconsin 2000), Middleton, Wis.
Danielle Leigh Harris (B.S. Univ. Florida 2007), Gainesville, Fla.
Deborah Hendrick (B.S. Boston Univ. 2005), Allston, Mass.
Fiona Caroline Horgan (B.A. Coll. of William and Mary 2003), Englewood, Colo.
Susanne Day Kenagy (B.A. Yale Univ. 2006), Belmont, Mass.
Katherine Kunstel (B.S. Ohio Univ. 2000), Bronx, N.Y.
Kathleen M. Lacci (B.S. Univ. Wisconsin 2006), The Woodlands, Tex.
Kelly Colleen Lohmann (B.A. California State Univ. [Long Beach] 1996; M.S.
San Diego State Univ. 2002), Fullerton, Calif.
Matthew Evan Milstein (B.A. Richard Stockton Coll. of New Jersey 2005),
San Francisco, Calif.
Meredith Moses (B.A. Colgate Univ. 1992), Bristol, Vt.
Gabriel Arcadio Rocha (B.S. Campbell Univ. 2006), Fayetteville, N.C.
Patricia Margaret Rose (B.S. Univ. Notre Dame 2007), Germantown, Tenn.
Adam Benjamin Shain (B.S. Western Connecticut State Univ. 2007), Fairfield, Conn.
Clay Daniel Shorter (B.S. Brigham Young Univ. 2006), Lynchburg, Va.
Michelle Smith (B.S. Pacific Lutheran Univ. 2003), Moses Lake, Wash.
Geoffrey Streeter (B. Brigham Young Univ. 2002), Gilbert, Ariz.
Becky Strickland (B.S. Brigham Young Univ. 2006), Las Vegas, Nev.
Lauren Ani Swisher (B.S. Valparaiso Univ. 2001; M.S. Univ. Virginia 2002),
Newington, Conn.
Maria Teresa Trigg (B.S. Mesa State Coll. 2005), Grand Junction, Colo.
Chelsea Lundstrom Woods (B.S. Western Washington Univ. 2003), Seattle, Wash.
Erica Ilene Zarolnick (B.A. Boston Univ. 2004), Smithtown, N.Y.

Total, 35

Second-Year Class
Jennifer M. Bialecki (B.S. Quinnipiac Univ. 2006), Branford, Conn.
Hira Bluestone (B.A. Evergreen State Coll. 1998), Seattle, Washington
Matthew Scott Brogan (B.S. California State Univ. [Long Beach] 2007), Lake Forest, Calif.
Heather Dobbin (B.S., M.S. Univ. Idaho 2006), Marsing, Idaho
Anna Doering (B.A. Concordia Univ. 2006), Kingwood, Tex.
Megan M. Duet (B.S. Louisiana State Univ. 2007), Houma, La.
Ashley Rae Echeverria (B.S. Univ. North Carolina [Chapel Hill] 2007), Wake Forest, N.C.
Kyle Evan Gubler (B.A. Univ. Utah 2006), North Salt Lake, Utah
Kelsey Anna Hand (B.A. Saint Olaf Coll. 2006), Atlanta, Ga.
Adam Joseph Harlan (B.A. Franciscan Univ. of Steubenville 2008), Fort Wayne, Ind.
Sondra Eleanah Jasienowski (B.A. Mount Holyoke Coll. 2007), Chicopee, Mass.
Courtney Anja Johnson (B.S. Calvin Coll. 2007), Lapeer, Mich.
Adam Kahn (B.S. Hofstra Univ. 2003; M.A. Hofstra Univ. 2008), Uniondale, N.Y.
Sean A. Lynch (B.S. Villanova Univ. 1996), Oakland, Calif.
Erin Nicole Lyons (B.S. Univ. Georgia 2006), Atlanta, Ga.
Megan McGee (B.S. Univ. North Dakota 2008), Grand Forks, N.D.
Lance McKay (B.S. Weber State Univ. 2008), Huntsville, Utah
Catherine Michelle Mihlfeith (B.A. Univ. Utah 2006), Salt Lake City, Utah
Mychael Shannon Patrick (B.S. California Polytechnic State Univ. [San Luis Obispo] 2007), San Luis Obispo, Calif.
Sharon Jean Pillsbury (B.S., B.A. Univ. Connecticut 2006), Durham, Maine
Indhira Altagracia Polanco (B.S. Columbia Univ. 2004), New York, N.Y.
Alisha Marie Raehl (B.S. Michigan Technological Univ. 2005), Traverse City, Mich.
Jamie Lh Sun (B.S. Univ. Texas [Austin] 2007), Austin, Tex.
Jennifer Szutu (B.S. Baylor Univ. 2007), Missouri City, Tex.
Sarah Elizabeth Troll (B.A. Illinois Wesleyan Univ. 2008), Itasca, Ill.

Total, 33

First-Year Class

Justin David Arnold (B.S. Univ. California [San Diego] 2008), La Jolla, Calif.
Richard David Bennett (B.S. Univ. Idaho 1999; Ph.D. Mayo Clinic of Medicine 2007), Great Falls, Mont.
Jonathon Mark Bostwick (B.S. Western Michigan Univ. 2006), Brighton, Mich.
Kelly Lauren Cederquist (B.S. Univ. Florida 2010), Gainesville, Fla.
Christina Chao (B.S. Trinity Coll. 2007; M.S. Northeastern Univ. 2008), Orange, Conn.
John Matthew Corsi (B.S. Trinity Coll. 1994; M.B.A. Boston Coll. 1999), Middletown, Conn.
Laura Ann Croni (B.S. John Carroll Univ. 2007), LaGrange Park, Ill.
Thomas Todd De Vries (B.S. Loyola Univ. 2007), Riverside, Ill.
Jessica DiStefano (B.S. Univ. New Hampshire 2008), Warwick, R.I.
Caroline M. Dudley (B.S. Univ. Miami 2003), Boston, Mass.
Suzanne Farhang (B.S. Univ. Maryland [College Park] 2008), Rockville, Md.
Tia Jean Ferrarotti (B.S. Fairfield Univ.), Bridgeport, Conn.
Jennifer Rachelle Fischer (B.A. Coll. New Jersey), Parsippany, N.J.
Casandra Francis (B.S. Miami Univ. [Ohio] 2006; M.S. Loyola Univ. 2007), Russia, Ohio
Zachary Greenier (B.S. Univ. Maine [Orono] 2009), Bangor, Maine
Natalie Marie Grome (B.S. Union Coll. 2010), Camillus, N.Y.
Ryan Patrick Hausfeld (B.S. North Carolina State Univ. 2008), Raleigh, N.C.
Crystal Huynh (B.S. Univ. California [Irvine] 2008), Santa Ana, Calif.
Eryn M. Johnson (B.S. King Coll. 2001), Lombard, Ill.
Daniel Thomas McNamara (B.S. Univ. Connecticut 2009), North Branford, Conn.
Daniel James Ozinga (B.S. Taylor Univ. 2008), Willowick, Ohio
Rakhi Ajit Patel (B.S. Emory Univ. 2007; M.P.H. George Washington Univ. 2009), McLean, Va.
Nicole Rachel Peter (B.S. Rutgers Univ. 2008), Philadelphia, Pa.
Ryan Michael Petrowsky (B.S. Quinnipiac Univ. 2002), Hamden, Conn.
Natalie Xaythavone Phouyaphone (B.S. Trinity Coll. 2006), New Haven, Conn.
Scott Pusateri (B.S. McDaniel Coll. 2009), Frederick, Md.
Harrison Leo Reed (B.S. Univ. South Florida 2010), Sanford, Fla.
Lauren Elizabeth Sawarynski (B.S. Pennsylvania State Univ. 2010), Port Matilda, Pa.
Dhara Sanatkumar Soni (B.S. Carleton Univ. 2005; B.S. Carleton Univ. 2007; M.S. Saint Louis Univ. 2010), St. Louis, Mo.
Angelica Torres (B.S. Rutgers Univ. 2010), Neptune, N.J.

Total, 40
The Work of Yale University

The work of Yale University is carried on in the following schools:

**Yale College**  Est. 1701. Courses in humanities, social sciences, natural sciences, mathematical and computer sciences, and engineering. Bachelor of Arts (B.A.), Bachelor of Science (B.S).

For additional information, please write to the Office of Undergraduate Admissions, Yale University, PO Box 208234, New Haven CT 06520-8234; tel., 203.432.9300; e-mail, student.questions@yale.edu; Web site, www.yale.edu/admit

**Graduate School of Arts and Sciences**  Est. 1847. Courses for college graduates. Master of Arts (M.A.), Master of Engineering (M.Eng.), Master of Science (M.S.), Master of Philosophy (M.Phil.), Doctor of Philosophy (Ph.D.).

For additional information, please visit www.yale.edu/graduateschool, write to graduate.admissions@yale.edu, or call the Office of Graduate Admissions at 203.432.2771. Postal correspondence should be directed to the Office of Graduate Admissions, Yale Graduate School of Arts and Sciences, PO Box 208323, New Haven CT 06520-8323.

**School of Medicine**  Est. 1813. Courses for college graduates and students who have completed requisite training in approved institutions. Doctor of Medicine (M.D.). Postgraduate study in the basic sciences and clinical subjects. Combined program with the Graduate School of Arts and Sciences leading to Doctor of Medicine and Doctor of Philosophy (M.D./Ph.D.). Combined program with the Graduate School of Arts and Sciences leading to Doctor of Medicine and Master of Health Science (M.D./M.H.S.). Master of Medical Science (M.M.Sc.) from the Physician Associate Program.

For additional information, please write to the Director of Admissions, Office of Admissions, Yale School of Medicine, 367 Cedar Street, New Haven CT 06510; tel., 203.785.2643; fax, 203.785.3234; e-mail, medical.admissions@yale.edu; Web site, http://info.med.yale.edu/education/admissions

**Divinity School**  Est. 1822. Courses for college graduates. Master of Divinity (M.Div.), Master of Arts in Religion (M.A.R.). Individuals with an M.Div. degree may apply for the program leading to the degree of Master of Sacred Theology (S.T.M.).

For additional information, please write to the Admissions Office, Yale Divinity School, 409 Prospect Street, New Haven CT 06511; tel., 203.432.5360; fax, 203.432.7475; e-mail, divinity.admissions@yale.edu; Web site, www.yale.edu/divinity. Online application, https://apply.divinity.yale.edu/apply

**Law School**  Est. 1824. Courses for college graduates. Juris Doctor (J.D.). For additional information, please write to the Admissions Office, Yale Law School, PO Box 208215, New Haven CT 06520-8215; tel., 203.432.4995; e-mail, admissions.law@yale.edu; Web site, www.law.yale.edu

Graduate Programs: Master of Laws (LL.M.), Doctor of the Science of Law (J.S.D.), Master of Studies in Law (M.S.L.). For additional information, please write to Graduate Programs, Yale Law School, PO Box 208215, New Haven CT 06520-8215; tel., 203.432.1696; e-mail, gradpro.law@yale.edu; Web site, www.law.yale.edu
School of Engineering & Applied Science  Est. 1852. Courses for college graduates. Master of Science (M.S.), Master of Engineering (M.Eng.), and Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Office of Graduate Admissions, Yale School of Engineering & Applied Science, PO Box 208267, New Haven CT 06520-8267; tel., 203.432.4250; e-mail, grad.engineering@yale.edu; Web site, http://seas.yale.edu

School of Art  Est. 1869. Professional courses for college and art school graduates. Master of Fine Arts (M.F.A.).

For additional information, please write to the Office of Academic Affairs, Yale School of Art, PO Box 208339, New Haven CT 06520-8339; tel., 203.432.2600; e-mail, artschool.info@yale.edu; Web site, http://art.yale.edu


For additional information, please write to the Yale School of Music, PO Box 208246, New Haven CT 06520-8246; tel., 203.432.4155; fax, 203.432.7448; e-mail, gradmusic.admissions@yale.edu; Web site, http://music.yale.edu

School of Forestry & Environmental Studies  Est. 1900. Courses for college graduates. Master of Forestry (M.F.), Master of Forest Science (M.F.S.), Master of Environmental Science (M.E.Sc.), Master of Environmental Management (M.E.M.). Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Office of Admissions, Yale School of Forestry & Environmental Studies, 195 Prospect Street, New Haven CT 06511; tel., 800.825.0330; e-mail, fesinfo@yale.edu; Web site, www.environment.yale.edu

School of Public Health  Est. 1915. Courses for college graduates. Master of Public Health (M.P.H.). Master of Science (M.S.) and Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Director of Admissions, Yale School of Public Health, PO Box 208034, New Haven CT 06520-8034; tel., 203.785.2844; e-mail, ysph.admissions@yale.edu; Web site, http://publichealth.yale.edu

School of Architecture  Est. 1916. Courses for college graduates. Professional degree: Master of Architecture (M.Arch.); nonprofessional degree: Master of Environmental Design (M.E.D.). Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Yale School of Architecture, PO Box 208242, New Haven CT 06520-8242; tel., 203.432.2296; e-mail, gradarch.admissions@yale.edu; Web site, www.architecture.yale.edu

School of Nursing  Est. 1923. Courses for college graduates. Master of Science in Nursing (M.S.N.), Post Master's Certificate. Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Yale School of Nursing, PO Box 9740, New Haven CT 06536-0740; tel., 203.785.2389; Web site, http://nursing.yale.edu

For additional information, please write to the Admissions Office, Yale School of Drama, PO Box 208325, New Haven CT 06520-8325; tel., 203.432.1507; e-mail, ysd.admissions@yale.edu; Web site, www.drama.yale.edu

School of Management  Est. 1976. Courses for college graduates. Master of Business Administration (M.B.A.), Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please write to the Admissions Office, Yale School of Management, PO Box 208200, New Haven CT 06520-8200; tel., 203.432.5635; fax, 203.432.7004; e-mail, mba.admissions@yale.edu; Web site, http://mba.yale.edu
1. Laboratory of Epidemiology and Public Health, 60 College St.
2. Boyer Center for Molecular Medicine
3. Jane Ellen Hope Building
4. Sterling Power Plant and Sterling Power Plant Co-Gen
5. Harvey Cushing/John Hay Whitney Medical Library
6. Sterling Hall of Medicine, 333 Cedar St.
   Wings: B, C, I & L
7. Mary S. Harkness Memorial Auditorium
8. Child Study Center
9. Nathan Smith Building (Bridge)
10. Yale Cancer Center
11. Hunter Building, 15 York St.
12. William Wirt Winchester Building
14. Brady Memorial Laboratory, 310 Cedar St.
15. Lauder Hall
16. Laboratory for Surgery, Obstetrics and Gynecology
17. Primary Care Center
18. Farnam Memorial Building
19. Tompkins East
20. Tompkins Memorial Pavilion
22. Clinic Building
23. Fitkin Memorial Pavilion
24. Fitkin Amphitheater
25. Laboratory for Medicine and Pediatrics
26. Lippard Laboratory of Clinical Investigation
27. P.E.T. Center
28. John B. Pierce Laboratory, 290 Congress Ave.
29. Congress Place, 301 Cedar St.
30. Yale-New Haven Psychiatric Hospital 2, 184 Liberty St.
31. Yale-New Haven Psychiatric Hospital 3, 184 Liberty St.
32. Anlyan Center for Medical Research and Education, 300 Cedar St.
33. 430 and 464 Congress Ave. and 726 Howard Ave.
34. Howard Ave. Garage
35. Yale Physicians Building, 800 Howard Ave.
36. 110 Davenport Ave. (YNHH Day Care Center)
37. 132–138 Davenport Ave. (Lead Program)
38. Edward S. Harkness Memorial Hall A and D, 367 Cedar St.
39. Neison and Irving Harris Building, Child Study Center, 230 S. Frontage Rd.
40. East Pavilion, 20 York St.
   (Yale-New Haven Hospital Main Entrance)
41. South Pavilion, 20 York St.
42. Emergency Services Parking
43. Children's Hospital Parking Garage
44. Children's Hospital (West Pavilion)
45. Smilow Cancer Hospital, 20 York St.
46. Connecticut Mental Health Center
47. Ronald McDonald House, 501 George St.
48. 425 George St.
49. Air Rights Parking Garage
50. 127, 135, and 153 College St.
51. New Haven Hotel, 229 George St.
52. Temple Garage
53. Temple Medical Center, 40–60 Temple St.
54. College Place, 47 College St.
55. Medical Center South, 100 Church St. South
   (Yale School of Nursing)
56. 10 Amistad St.
57. Amistad Garage
58. 270 Congress Ave.
59. 300 George St.
60. 2 Church St. South
Travel Directions

See also http://business.yale.edu/map/medicine.html. Additional parking is available at the Amistad, Howard Avenue, and Temple garages, and at Yale-New Haven Hospital’s Emergency Department and Children’s Hospital.

BY AIR

Tweed–New Haven Airport is the closest airport and is approximately four miles from the Yale campus. It is serviced by USAirways (800.428.4322) and Pan Am (800.359.7262). Local taxi service, Metro Cab (203.777.7777), is available at the airport. Connecticut Limousine Service (800.472.5466) to New Haven services Kennedy International Airport (New York), La Guardia Airport (New York), Newark International Airport (Newark, New Jersey), and Bradley International Airport (Windsor Locks, Connecticut, near Hartford).

BY TRAIN

There is hourly Metro-North (800.638.7646) service to New Haven from Grand Central Station in New York every day of the week. Amtrak (800.872.7245) service is scheduled daily from Boston, Washington, D.C., or New York (Penn Station).

BY CAR

From I-95 North or South  Take Exit 47 (Route 34) to Exit 2 or 3. Visitor parking is available in the Air Rights Garage, which can be entered from North or South Frontage Roads, or from York Street.

From I-91 South  Take Exit 1 (Route 34) to Exit 2 or 3. Continue to the Air Rights Garage, as above.

From Merritt Parkway (Rte. 15) North  Take Exit 57 to Route 34 East into New Haven. Turn right onto Ella T. Grasso Boulevard (Rte. 10) and then left onto South Frontage Road (Legion Avenue). Follow Yale-New Haven Hospital and Rte. 34 signs. Continue to the Air Rights Garage, as above.

From Wilbur Cross Parkway (Rte. 15) South  Take Exit 59 immediately after the tunnel. Go right at end of ramp. Merge left onto Whalley Avenue at light. Stay on Whalley until you see signs for Yale-New Haven Hospital at Park Street. Follow hospital signs, then make a left turn onto South Frontage Road. Continue to the Air Rights Garage, as above.
The School of Medicine is celebrating its Bicentennial in 2010–2011 with a series of lectures and special publications, a documentary film, a community fair, and a symposium exploring the biomedical sciences. An illustrated book about the school, *Medicine at Yale: The First 200 Years*, will be available from Yale University Press in November 2010.

The Bicentennial provides an opportunity to reflect on the achievements of the past two centuries and the ways in which medicine has changed since 1810. Then, life expectancy in New Haven was less than forty years, and medical knowledge was derived from concepts that have long since been discounted. During the School’s evolution, a largely unscientific occupation handed down through apprenticeship has become one of the most education-intensive, rigorously scientific, and highly regulated professions.

As American medicine looks ahead to improving health care, unraveling the mysteries underlying disease, and optimally preparing the doctors of the coming decades, Yale will continue to meet the challenges of a changing medical landscape.