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# Calendar

## Two Hundred and Seventh Session

### Fall 2018

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<tr>
<td>June 11</td>
<td>M</td>
<td>Matriculation for first-year students in the START @ Yale Program</td>
</tr>
<tr>
<td>June 18</td>
<td>M</td>
<td>First term begins for fourth- and fifth-year students</td>
</tr>
<tr>
<td>July 2</td>
<td>M</td>
<td>First term begins for third-year students</td>
</tr>
<tr>
<td>Aug. 9</td>
<td>TH</td>
<td>Matriculation for first-year students</td>
</tr>
<tr>
<td></td>
<td></td>
<td>First term begins for first-year students</td>
</tr>
<tr>
<td>Aug. 18</td>
<td>SA</td>
<td>Fall online SIS check-in begins</td>
</tr>
<tr>
<td>Sept. 3</td>
<td>M</td>
<td>Labor Day. No classes for first-year students</td>
</tr>
<tr>
<td>Sept. 5</td>
<td>W</td>
<td>First term begins for second-year students</td>
</tr>
<tr>
<td>Oct. 31</td>
<td>W</td>
<td>Fall online SIS check-in ends</td>
</tr>
<tr>
<td>Nov. 19 – 23</td>
<td>M–F</td>
<td>Fall recess for first- and second-year students</td>
</tr>
<tr>
<td>Nov. 22 – 23</td>
<td>TH–F</td>
<td>Thanksgiving break for third-year students</td>
</tr>
<tr>
<td>Dec. 15</td>
<td>SA</td>
<td>Winter recess begins for third-year students</td>
</tr>
<tr>
<td>Dec. 19</td>
<td>SA</td>
<td>Winter recess begins for second-year students</td>
</tr>
<tr>
<td>Dec. 22</td>
<td>SA</td>
<td>Winter recess begins for first-year students</td>
</tr>
</tbody>
</table>

### Spring 2019

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>Jan. 2</td>
<td>W</td>
<td>Second term begins for first-year and third- through fifth-year students</td>
</tr>
<tr>
<td>Jan. 3</td>
<td>TH</td>
<td>Spring online SIS check-in begins</td>
</tr>
<tr>
<td>Jan. 7</td>
<td>M</td>
<td>Second term begins for second-year students</td>
</tr>
<tr>
<td>Jan. 21</td>
<td>M</td>
<td>Martin Luther King, Jr. Day. No classes for first-year students</td>
</tr>
<tr>
<td>Mar. 11</td>
<td>M</td>
<td>Spring recess begins for first-year students</td>
</tr>
<tr>
<td>Mar. 15</td>
<td>F</td>
<td>Spring online SIS check-in ends</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Match Day</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Spring recess ends</td>
</tr>
<tr>
<td>May 7</td>
<td>T</td>
<td>Student Research Day. No afternoon classes for first-year students</td>
</tr>
<tr>
<td>May 17</td>
<td>F</td>
<td>Spring term ends for fourth-year students</td>
</tr>
<tr>
<td>May 20</td>
<td>M</td>
<td>University Commencement</td>
</tr>
<tr>
<td>June 11</td>
<td>T</td>
<td>Spring term ends for first-year students</td>
</tr>
<tr>
<td>June 14</td>
<td>F</td>
<td>Spring term ends for third- and fifth-year students</td>
</tr>
<tr>
<td>June 21</td>
<td>F</td>
<td>Spring term ends for second-year students</td>
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The President and Fellows of Yale University

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

Fellows
His Excellency the Governor of Connecticut, ex officio
Her Honor the Lieutenant Governor of Connecticut, ex officio
Joshua Bekenstein, B.A., M.B.A., Wayland, Massachusetts
Charles Waterhouse Goodyear IV, B.S., M.B.A., New Orleans, Louisiana
Catharine Bond Hill, B.A., B.A., M.A., Ph.D., New York, New York
Paul Lewis Joskow, B.A., Ph.D., Brookline, Massachusetts
William Earl Kennard, B.A., J.D., Charleston, South Carolina
Gina Marie Raimondo, A.B., D.Phil., J.D., Providence, Rhode Island (June 2020)
Emmett John Rice, Jr., B.A., M.B.A., Bethesda, Maryland
Eve Hart Rice, B.A., M.D., Bedford, New York (June 2021)
Joshua Linder Steiner, B.A., M.St., New York, New York
David Li Ming Sze, B.A., M.B.A., Hillsborough, California
Annette Thomas, S.B., Ph.D., Cambridge, England (June 2022)
Kathleen Elizabeth Walsh, B.A., M.P.H., Wellesley, Massachusetts (June 2023)
Douglas Alexander Warner III, B.A., Hobe Sound, Florida
Lei Zhang, B.A., M.A., M.B.A., Hong Kong, China
The Officers of Yale University

**President**
Peter Salovey, A.B., A.M., Ph.D.

**Provost**
Benjamin Polak, B.A., M.A., Ph.D.

**Secretary and Vice President for Student Life**
Kimberly Midori Goff-Crews, B.A., J.D.

**Senior Vice President for Operations**
Jack Francis Callahan, Jr., B.A., M.B.A.

**Senior Vice President for Institutional Affairs and General Counsel**
Alexander Edward Dreier, A.B., M.A., J.D.

**Vice President for Finance and Chief Financial Officer**
Stephen Charles Murphy, B.A.

**Vice President for Alumni Affairs and Development**
Joan Elizabeth O’Neill, B.A.

**Vice President for West Campus Planning and Program Development**
Scott Allan Strobel, B.A., Ph.D.

**Vice President for Communications**
Eileen Mary O’Connor, B.S., J.D.

**Vice President for Human Resources and Administration**
Janet Elaine Lindner, B.S., M.P.A., Ed.D.

**Vice President for Global Strategy**
Pericles Lewis, B.A., A.M., Ph.D.

**Vice President for Facilities and Campus Planning**
John Harold Bollier, 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
Peter Salovey, Ph.D., President of the University
Benjamin Polak, Ph.D., Provost of the University
Robert J. Alpern, M.D., Dean of the School of Medicine
Sten H. Vermund, M.D., Ph.D., Dean of the School of Public Health
Richard Belitsky, M.D., Deputy Dean for Education
Linda K. Bockenstedt, M.D., Deputy Dean for Faculty Affairs
Michael C. Crair, Ph.D., Deputy Dean for Scientific Affairs (basic science departments)
Darin Latimore, M.D., Deputy Dean for Diversity and Inclusion
Brian R. Smith, M.D., Deputy Dean for Scientific Affairs (clinical departments)
Paul Taheri, M.D., M.B.A., Deputy Dean for Clinical Affairs and Chief Executive Officer of Yale Medicine
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
Frederick J. Borrelli, M.B.A., M.S., Chief Administrative Officer, Yale Medicine
Iain Burchell, M.B.A., Chief Financial Officer, Yale Medicine
Carrie P. Capezzone, M.B.A., Associate Dean for Finance
James P. Comer, M.D., M.P.H., Associate Dean for Student Progress
Michael H. Ebert, M.D., Associate Dean for Veterans’ Affairs
John N. Forrest, M.D., Director, Office of Student Research
John Gallagher, M.L.S., Director, Medical Library
Alexandria Garino, M.S., PA-C, Director, Physician Associate Program
Janet Hafler, Ed.D., Associate Dean for Educational Scholarship
N’Kenge Haines, B.A., Director of Financial Aid
Michael F. Hoepp, M.B.A., Chief of Staff, Office of the Dean
Mary J. Hu, M.B.A., Associate Dean of Communications
Steven J. Huot, M.D., Ph.D., Associate Dean for Graduate Medical Education
Robert G. Kanoff, B.S., Assistant Dean for Finance and Administration, School of Public Health
Barbara I. Kazmierczak, Ph.D., M.D., Director, M.D./Ph.D. Program
Martin Klein, Ph.D., M.P.H., Associate Dean for Development and External Affairs, School of Public Health
Anthony J. Koleske, Ph.D., Director, Combined Program in the Biological and Biomedical Sciences
Brian P. Leaderer, Ph.D., M.P.H., Deputy Dean of Public Health
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 30, 2018.
A Message from the Dean

Yale School of Medicine was founded in 1810 as the Medical Institution of Yale College. This past May at Commencement, we reached a milestone, surpassing 9,000 medical degrees conferred in the School's proud history. We celebrate this achievement with a goal of continuing to educate tomorrow’s leaders of the medical profession, as well as a firm focus on the innovative research that we undertake in every area of the biomedical sciences and the advanced care that our Yale Medicine physicians provide.

Basic translational research is helping us identify drivers of the growth and spread of cancer, and of resistance to drugs, that new therapies can target. We are at the forefront of learning how to harness the immune system to kill cancer cells. In the neurosciences, we are making progress in understanding the intricacies of the brain and the biological basis of behavior and abnormal brain function, and gaining insight about the underpinnings of such neurodegenerative brain diseases as Alzheimer’s, Parkinson’s, and ALS. We are devoting extensive resources to developing and obtaining new technologies to study cells, genes, and other essential structures of life in atomic detail. An example is Yale’s acquisition of a Titan Krios cryo-electron microscope that allows investigators to create brilliant high-resolution 3-D images, which was not possible before.

Our researchers and clinicians also combine their considerable talents to attain advances in personalized medicine. Their ability to link whole-genome sequencing to a patient’s health record is creating possibilities for predicting diseases for which patients are at particular risk, and which treatments will work best in specific patients. We are applying this precision medicine approach in areas that include newborn diseases, prenatal diagnosis, and personalized cancer treatments where we identify a tumor’s genetic abnormalities to determine the most effective treatment.

Our methods of educating students are also at the leading edge. The courses described in this Bulletin represent a new curriculum launched in 2015 and continually refined both through self-evaluation and by observing best educational practices at other institutions and in other disciplines. Our program combines personal interaction with preeminent faculty with effective technology tools that promote more interactive learning and innovative teaching.

Welcome to all, at an exciting time for Yale School of Medicine.

Robert J. Alpern, M.D.
Dean and Ensign Professor of Medicine
Yale School of Medicine
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 Public Health, Yale New Haven Hospital (YNHH), Smilow Cancer Hospital, Connecticut Mental Health Center, and the John B. Pierce Laboratory. In 2013 the School of Nursing moved to Yale West Campus in Orange, Connecticut.
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 Center for Cellular and Molecular Imaging, the Child Study Center, the departments of Cellular and Molecular Physiology, Pharmacology, Molecular Biophysics and Biochemistry, Genetics, Cell Biology, Neuroscience, Yale Cancer Center, and History of Medicine.

The Harvey Cushing/John Hay Whitney Medical Library, located in Sterling Hall of Medicine, houses approximately 366,000 print volumes and subscribes to more than 23,000 electronic journals, 38,000 electronic books, and 96 databases. It offers comfortable seating, small-group study spaces, computers, and services to help with research.

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 (YNHH) is a nationally recognized, 1,541-bed, not-for-profit hospital serving as the primary teaching hospital for the Yale Schools of Medicine and Nursing. YNHH was founded as the fourth voluntary hospital in the United States in 1826. Today it includes a Children’s Hospital, a Psychiatric Hospital, Smilow Cancer Hospital, and two main campuses in New Haven (York Street and Saint Raphael). YNHH has a combined medical staff of more than 4,200 University and community physicians practicing in more than one hundred specialties. Last year, YNHH cared for 79,490 inpatients and handled nearly 1.4 million outpatient encounters. YNHH (www.ynhh.org) is the flagship hospital of the Yale New Haven Health System, an integrated delivery system that includes Bridgeport, Greenwich, Lawrence + Memorial, and Westerly hospitals, and their affiliated organizations, as well as Northeast Medical Group.

The Laboratory of Epidemiology and Public Health is the School’s other major teaching facility and is home to 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, Urology, Comparative Medicine, 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; Neuroscience; Internal Medicine; Pediatrics; 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, Laboratory Medicine, Neurology, Neurosurgery, Orthopaedics and Rehabilitation, Pathology, Radiology and Biomedical Imaging, and Urology; 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), which houses Neurology department offices and research labs for the departments of Dermatology, Pediatrics, and Therapeutic Radiology.

Laboratories of the departments of Ophthalmology and Visual Science and Neurology; the Cardiology section; the Cancer Center; the Keck Foundation Biotechnology Resource Laboratories, and the Human and Translational Immunology Program; offices for the Geriatric section; 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 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 Radiology and Biomedical Imaging, maintains three MR imaging systems for clinical examination. A new Positron Emission Tomography (PET) Center, also operated by the Department of Radiology and Biomedical Imaging, 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 as well as academic and administrative offices for the Department of Orthopaedics and Rehabilitation 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, Laboratory Medicine, Neurosurgery, and Radiology and Biomedical Imaging.

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.
The Harvey Cushing/John Hay Whitney Medical Library provides access to an extensive array of information resources and tools, offers research assistance and expertise, and delivers meaningful services to our users, to support innovation and excellence in biomedical research, patient care, and the development of scholars and future leaders in health care.

HISTORY

Elihu Yale himself donated Yale College’s first two medical volumes. A century later, in 1813, the Medical Institution of Yale College opened, but it was not until 1917 that the professors of the medical school began a separate medical library on the medical campus. The Historical Library was the vision of Dr. Harvey Cushing, a neurosurgeon and pioneer of brain surgery, who graduated from Yale College in 1891 and returned to Yale in 1933. Cushing joined with his two friends and fellow bibliophiles, Arnold C. Klebs and John F. Fulton, in what they called their “Trinitarian Plan,” to donate their superb book collections to Yale. As the plan matured it became wedded to the idea of creating a new
medical library for the Yale School of Medicine. Cushing was the driving force persuading Yale officials to realize his vision. He wanted the medical library to be the heart of the medical school and therefore specified that it be located on the main floor and that the old and new collections be equally accessible. This vision was realized in 1941 with the dedication of the Yale Medical Library, designed in the shape of a Y with two wings, one for the Historical Library reading room and one for what was then the periodical room, with stacks below for books and journals. The central rotunda honors Dr. Harvey Cushing.

A generous gift from Betsey Cushing Roosevelt Whitney, daughter of Dr. Harvey Cushing, enabled a major renovation and expansion of the Medical Library that included the addition of a skylit Information Room and increased study and stack space. Upon completion of the renovations in June 1990, the library was officially renamed the Harvey Cushing/John Hay Whitney Medical Library, honoring both Cushing and John Hay Whitney (1904–1982), Yale graduate, editor of the Herald Tribune, and patron of the arts.

SERVICES

During orientation week, first-year students are introduced to the library and their “personal librarian.” Every Yale medical student has a personal librarian to answer questions and help in research, especially when approaching the thesis.

Students have access to library resources beyond the Medical Library’s vast collections. The library can scan, loan, or deliver articles and books not owned by Yale from other libraries around the world.

Library guides and video tutorials provide 24/7 help on a wide range of library topics, from beginning thesis research to using a specific library resource. Most questions about the library can be answered by the Medical Library website, but students should not hesitate to contact their personal librarian for assistance.

SPACES TO COLLABORATE AND STUDY

Students will find options available for group or individual study space throughout the Medical Library. Individual study carrels and tables are located on all levels of the library. The Morse Reading Room is designated as quiet study space. The Medical Library will begin extensive renovations in July 2018. During renovations, some spaces may not be available, but new and improved areas will be available after renovations are complete in April 2019. Details about available spaces and the renovation can be found at http://library.medicine.yale.edu.

COMPUTING IN THE LIBRARY

The Cushing/Whitney Medical Library provides Windows and Mac computers in multiple locations, including the 24/7 Computer & Study Space. The computers have productivity software such as Microsoft Office, EndNote, and other tools including desktop publishing software, statistics and GIS software (SAS, SPSS, ArcGIS, etc.), and medical education software. Black-and-white and color printers/copiers/scanners are available. In addition, the library offers two scanning stations (Windows and Mac) in the 24/7
space, which have a variety of applications for graphics and video editing and production. A high-performance workstation with a suite of licensed and open source tools, such as BRB-Array Tools, Cytoscape, and Qlucore, is also available to process, manage, analyze, and visualize data in a variety of formats. Access to this workstation can be reserved by any Yale researcher.

A mix of Windows and Mac laptops are available for Medical Center students needing a computer for short-term use. Digital cameras, camcorders, and related video accessories are available at the Circulation Desk. Also available are chargers for common models of mobile phones, iPads, and both Lenovo and Apple computers. This equipment may be borrowed by anyone with a valid Yale ID.

LIBRARY COLLECTIONS

The Cushing/Whitney Medical Library provides a comprehensive collection of clinical reference tools, databases, evidence-based practice resources, image collections, educational software, and books and journals in support of programs in medicine, nursing, public health, physician associates, bioinformatics, and the basic sciences. The library provides access to more than 38,000 electronic books, 23,000 electronic journals, and 96 databases, in addition to more than 366,000 print volumes. Its holdings also include all Yale medical student theses, many of which are available online. Yale affiliates have access to the library’s electronic collections from any device wherever they are.

The Medical Historical Library contains one of the world’s finest collections of rare medical books, journals, prints, posters, drawings, and photographs, as well as current works in the history of medicine. There are 325 medical incunabula, more than 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 catalogs, yearbooks, photographs, and other publications and ephemera related to the Yale School of Medicine. Special strengths in the collection are the works of Hippocrates, Galen, Vesalius, Boyle, Harvey, Culpeper, Haller, Priestley, and S. Weir Mitchell, and works on anatomy, anesthesia, and smallpox inoculation and vaccination. The library also owns an extensive smoking and tobacco advertising collection and the Robert Bogdan collection of disability photographs and postcards. In addition, an outstanding selection of photographs, posters, and other images is available in the Cushing/Whitney Medical Library Digitized Collections.

The Cushing Center, located in the Cushing/Whitney Medical Library, houses a unique collection of materials once owned by Dr. Harvey Cushing. The center is the home of the Harvey Cushing Brain Tumor Registry, which consists of approximately 600 brain specimens, glass-plate negatives, and accompanying patient files from the early twentieth century. The space also displays a portion of his rich collection of rare books, part of the Medical Historical Library's collections.

MEDICAL LIBRARY ASSOCIATES

The Associates of the Cushing/Whitney Medical Library are friends of the library who, through membership and other contributions, are committed to assist the Medical Library in its mission of serving the information needs of Yale students, faculty, and
Funds raised by associates represent unallocated money that can be used at the librarian’s discretion to support various projects.

The associates host an annual lecture in the Historical Library in the spring. Past lecturers include Nobel Laureates, writers, professors, and Surgeons General who have spoken on a wide variety of topics relating to medicine. A gratis membership for Yale medical students continues through their years of residency. More information is available online at http://library.medicine.yale.edu/associates.
Degree Programs

Students at the School of Medicine are candidates for the degree of Doctor of Medicine (M.D.). Students receiving competitive fifth-year research fellowships are eligible for the combined degree M.D./M.H.S. (Master of Health Science). Students completing a curriculum of didactic, research, and clinical experiences in global health are eligible for the Certificate in Global Medicine. 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 the combined degrees of Doctor of Medicine (M.D.) and Doctor of Philosophy (Ph.D.). 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 Physician Associate program and a Physician Assistant Online program leading to a Master of Medical Science (M.M.Sc.) degree. Jointly with the School of Public Health, the School of Medicine also administers the PA/M.P.H. program leading to the combined Master of Medical Science (M.M.Sc.) and Master of Public Health (M.P.H.) degrees.

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 pre-clerkship integrated courses and clinical experience courses.
2. Pass all of the required clinical clerkships.
3. Complete and pass a subinternship.
4. Pass the examinations of the United States Medical Licensing Examination (USMLE), Steps I and II.
5. Submit an approved dissertation by mid-March of the year of graduation.
6. Pass the clinical skills assessment, performed at the University of Connecticut (C-OSCE) in Year 3.
7. 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/equalopportunity/policies.

In evaluating candidates, the committee takes into consideration many factors including academic record; MCAT scores; medical experience; research experience; extracurricular and community activities and accomplishments; leadership potential; recommendations from premedical committees, individual science teachers, or research mentors; 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 (one year)
   - General Chemistry (one year)
   - Organic Chemistry (one semester)
   - Biochemistry (one semester)
   - General Physics (one semester)
(Acceptable courses in these subjects are usually given six to eight hours credit per year, or three to four term hours credit per semester.) These courses should be completed in a U.S., Canadian, or U.K. 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 website: 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 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 about 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 104.

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.
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 via AMCAS Letter Service. 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 $95 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 the student’s 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 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. Transfer applicants whose eligibility is established in this manner 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.

2. A serious illness in the immediate family of the applicant requires 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. Transfer applicants whose eligibility is established in this manner must provide specific information regarding the family member’s illness to the Admissions Committee.
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. Decisions regarding the exceptional nature of the research and uniqueness of opportunities at Yale will be made by the Admissions Committee, based on information provided by the applicant and by the Yale faculty member with whom the applicant has collaborated.

If an applicant does not fall into one of the above “compelling need” eligibility categories, as determined by the Admissions Committee, the applicant’s transfer application will not be considered, regardless of other qualifications. The distance of the applicant from New Haven will also be taken into consideration. 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 the curriculum 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. In all cases, in accordance with AAMC guidelines, the applicant’s transfer request must be supported by the dean of students (or comparable official) at the original medical school, and courses being taken at the original medical school must be completed successfully.

Eligible transfer applicants will be evaluated by the Admissions Committee, with decisions based on academic credentials, supporting material, interviews, and the urgency of the need to transfer. Overall qualifications are expected to be comparable to those of Yale students admitted through the regular admissions process. Regardless of eligibility factors and qualifications, transfer into either the second- or third-year class is contingent upon the availability of positions in the class at Yale, and transfer into the third-year class is also contingent on the capacity of clinical clerkships to accommodate additional students.

All accepted applicants must matriculate in the year accepted. 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 Yale 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 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 expected 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-clerkship 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 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-clerkship years, the students acquire knowledge and develop clinical skills. In the integrated basic and clinical science courses, lectures are held to a minimum, and there is a focus on interactive learning in small-group workshops and conferences. Students are evaluated through examinations that they take anonymously. Performance is assessed by the faculty based upon participation in small-group sessions, by anonymous qualifying examinations at the end of each course, and by passing of the United States Medical Licensing Examinations. Competency in performing a complete history and physical examination is assessed at the end of the pre-clerkship period using standardized patients in an observed structured clinical examination (P-OSCE). Student attendance is expected in all skill-building sessions and sessions in which interactive learning, clinical reasoning, or collaboration are necessary for optimal learning.

In the pre-clerkship period (first eighteen months) 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 formative feedback interchanges between
faculty and students to be the most effective means of teaching and evaluation. Students should expect direct questioning in workshops and labs as an important adjunct to the evaluation process. The final decision of acceptable performance for a given course or clerkship is determined by the course/clerkship director based upon the successful completion of the assessments described above. Freed from the usual anxieties provoked by high-stakes summative 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 expected to submit a programmatic evaluation so that course/clerkship directors can make changes based on student feedback.

Finally, the Yale System requires each student to design, carry out, and successfully complete a research thesis, intended to foster the development of a lifelong commitment to learning (see Required Thesis, in the chapter Degree Programs).

**Pre-Clerkship Curriculum**

The first eighteen months of the curriculum focus on providing students with a foundation in the basic and clinical sciences and the art of medical practice. During this period, students engage in eleven Integrated Courses, the Clinical Skills course, and the Interprofessional Longitudinal Clinical Experience. The integrated course curriculum includes eight master courses (Introduction to the Profession, Scientific Foundations, Genes and Development, Attacks and Defenses, Homeostasis, Energy and Metabolism, Connection to the World, and Across the Lifespan); and three longitudinal courses (Professional and Ethical Responsibility, Human Anatomy, and Scientific Inquiry).

The Clinical Skills course (CS) introduces students to the principles and skills of medical interviewing and physical examination. CS course sessions meet weekly and provide an opportunity for students to observe and develop clinical skills.

In addition to didactic sessions, students will also participate in the Interprofessional Longitudinal Clinical Experience (ILCE) in the first year, where students will work in interprofessional teams with students from Yale School of Nursing and the Physician Associate Program in a consistent clinical setting. Students meet at their clinical settings one afternoon per week. At the end of the first year, students are assessed on their acquired clinical skills utilizing a two-case Observed Structured Clinical Exam (P-OSCE).

In the fall of the second year, students participate in the Medical Coach Experience (MCE) to learn advanced clinical skills and prepare them for the clerkship year.

**Pre-Clerkship Requirements**

In order to proceed to the clerkship year, a student must satisfy the following requisites:
1. Pass the mandatory qualifying examinations for all first- and second-year courses.
2. Pass the Clinical Skills course by attending all didactic and skill-building sessions.
3. Meet all requirements of the Interprofessional Longitudinal Clinical Experience (ILCE) and MCE courses.
4. Achieve clinical competence as ascertained by the P-OSCE assessment.
5. Comply with all immunization requirements.
6. Provide feedback on all pre-clerkship courses by completing surveys and participating in advisory groups.
The Clerkship Year

CLINICAL CLERKSHIPS

The clerkship curriculum consists of four twelve-week integrated clerkship blocks:

- The Medical Approach to the Patient (Internal Medicine and Neurology)
- The Surgical Approach to the Patient (Surgery and Emergency Medicine)
- Women’s and Children’s Health (Obstetrics & Gynecology and Pediatrics)
- Biopsychosocial Approach to Health (Ambulatory Internal Medicine, Psychiatry, Family Medicine, and Pediatric Primary Care)

Clerkship scheduling will be arranged through the registrar in the Office of Student Affairs. There is no required order for taking clerkships, and there is no advantage to any particular order. Students are required to complete and pass all clerkships before proceeding to the Advanced Clinical Training and Research period.

Advanced Clinical Training and Research

The final phase of the curriculum includes a time of maximum flexibility and choice for students to engage in a variety of clinical electives and subinternships, research, thesis preparation, and residency preparation.

The Office of Student Affairs holds an informational meeting in the fall of the third year (last six months of the clerkship period), and students meet with their advisers to discuss scheduling and requirements during the advanced clinical training and research period.

Graduating students are required to submit a thesis plan to the Office of Student Research in the fall of their final year. Students must provide a tentative thesis title and the name of the thesis adviser as part of the thesis plan.

Clinical Skills Assessment (C-OSCE) Requirements

It is important to have a formal assessment of clinical skills to determine whether students have achieved the required level of competence in history taking, physical examination, communication, and clinical reasoning.

For Yale medical students, this formal assessment occurs at the completion of the clerkships at the clinical skills facility at the University of Connecticut. Students evaluate simulated patients, who portray patients with common clinical presentations, and are evaluated using checklists and rating scales. All encounters are videotaped. Passing standards are determined with accepted procedures.

If a student fails the assessment, the student meets with a member of the Yale Skills Assessment Team to review the performance based on established criteria and create an action plan for improvement. The student then returns to UConn for reassessment in six to eight weeks.

Policy

1. Students must demonstrate competence in clinical skills, determined by passing the C-OSCE assessment, as a requirement for graduation.
2. C-OSCE is offered during, or immediately after, the last clerkship rotation in the clerkship year. Students will be scheduled to take it as close to the completion of
their clerkships as possible, recognizing that some students such as those who have postponed a clerkship will have to take the assessment before they have completed all of their clerkships.

3. If a student fails the first attempt, the student and the student’s academic adviser are notified and a plan is made for remediation. Two additional attempts to pass within the next twelve months are permitted.

4. Failure on three attempts results in dismissal. Based on extraordinary circumstances, the Progress Committee may direct the Clinical Skills Assessment Committee (CSAC) to independently evaluate the student’s clinical skills, drawing upon observations in the two recent remediation periods and, if needed, new assessments. If the CSAC confirms insufficient clinical skills, the student will be dismissed. However, if the CSAC determines that the student demonstrates a minimum competence in clinical skills, the student will be credited for this graduation requirement.

**United States Medical Licensing Examinations (USMLE)**

**Requirements**

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

**USMLE STEP I**

The Office of Student Affairs holds a USMLE Step I Fair and informational session. Students apply for the USMLE online at the NBME (National Board of Medical Examiners) website at www.nbme.org. Information on how to register for the USMLE examination is available online at http://medicine.yale.edu/education/osa/registrar/Copy_of_index.aspx. The United States Medical Licensing Examinations (USMLE) Step I, and the Step II Clinical Knowledge (CK), are computer-administered at Prometric Testing Centers. This system has given students considerable flexibility over the choice of test time and place. Students should consult the USMLE website for more information (www.usmle.org).

**Matriculation on or before 2014** Students are required to sit for Step I of the United States Medical Licensing Examination by December 31 of the third chronological year of medical school; however, students are strongly encouraged to take Step I before starting clinical clerkships in June of the third year.

**Matriculation on or after 2015** All M.D. students are required to sit for Step I of the United States Medical Licensing Examination by December 31 of their fourth year of medical school, but students are strongly encouraged to take it within six months of completing their clinical clerkships.

**Joint degree** For students completing a joint degree (other than an M.D./Ph.D.), Step I and both parts of Step II must be taken and passed before starting the second degree program.

For additional information, see https://medicine.yale.edu/education/ppgg/USMLE%20Requirements%20and%20Guidelines_320507_5_v4.pdf.
USMLE STEP II

The written Step II exam is called Step II Clinical Knowledge (Step II CK). Step II CK must be taken by December 31 of the final (fourth) year. It is strongly recommended that students take Step II CK early in the advanced clinical training and research period immediately after completing the clinical clerkships. Like Step I, this computer-based exam is administered at Prometric Test Centers throughout the world.

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. However, it is to the student’s advantage to take Step II CS as soon as possible after completing the clinical clerkships. Utilizing standardized patients, this exam is administered at regionally located centers operating year-round. Information on how to register for the USMLE examination is available online at http://medicine.yale.edu/education/osar/registrar/Copy_of_index.aspx

It is the student’s responsibility to ensure that both parts of USMLE Step II are scheduled and taken by December 31 of their final year. Disregarding this requirement is considered unprofessional behavior and may be considered by the Progress Committee in deciding whether a student has satisfactorily completed the requirements to graduate. If a student schedules the exams but then fails to take them as scheduled, the Progress Committee and the dean of the medical school will be notified. In addition, the student may be prevented from putting in a match list, or the residency programs to which the student has applied may be notified that the student behaved in an unprofessional manner and may be in jeopardy of not graduating on time to start residency.

FAILURE OF USMLE STEP I, II CK, AND STEP II CS POLICY

Any failure of Step I, Step II CK, or Step II CS will be brought to the attention of the Progress Committee and the student’s academic adviser. In general, a student in good standing will be allowed three attempts to take and pass each of these examinations. The timing of the repeat exams should be determined in consultation with the academic adviser. If a student fails an exam three times, the Progress Committee will review the student’s overall academic progress. Under extraordinary circumstances, the Progress Committee may permit a fourth attempt, but barring that permission, the student will be dismissed from the medical school.

If a student who fails one of these exams is also experiencing other academic difficulties, including issues related to unprofessional behavior or failure to progress through the clinical clerkships, or is already on academic probation, the Progress Committee will review the student’s overall academic progress. The Progress Committee will then determine how many times and under what circumstances that individual may be permitted to repeat these exams, which may be fewer than three times.

Course Schedules, 2018–2019

Integrated Course Curriculum (eighteen months)
Introduction to the Profession
Scientific Foundations
Genes and Development
Attacks and Defenses
Homeostasis
Energy and Metabolism
Connection to the World
Across the Lifespan
Professional and Ethical Responsibility
Human Anatomy
Scientific Inquiry: Biostatistics and Research Methods and Responsible Conduct of Research
Clinical Skills
Integrated Longitudinal Clinical Experience (ILCE)
Medical Coaches Experience (MCE)

CLERKSHIP YEAR
Four required clerkship blocks:
- The Medical Approach to the Patient (Internal Medicine and Neurology)
- The Surgical Approach to the Patient (Surgery and Emergency Medicine)
- Women's and Children's Health (Obstetrics & Gynecology and Pediatrics)
- Biopsychosocial Approach to Health (Ambulatory Internal Medicine, Psychiatry, Family Medicine, and Pediatric Primary Care)

ADVANCED CLINICAL TRAINING AND RESEARCH
Students are required to schedule one four-week subinternship, thirty-three weeks of scheduled clinical electives or research time, and the capstone course at the end of the fourth year. Students will also schedule time for the USMLE Step I, Step II CK, and Step II CS board examinations and for interviewing and residency preparation.

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 full-time faculty who are distinguished scientists, clinicians, and scholars. The investigation may have its origins in basic science or in clinical, laboratory, epidemiology and public health, or medicine and the humanities (medical ethics, history of medicine, etc.). A hypothesis must be defined, experimental methods developed, 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 deadlines throughout the year). In addition there are many national (Howard Hughes Medical Institute, National Institutes of Health, Doris Duke Charitable Foundation, Sarnoff Foundation, American Heart Association) and Yale-sponsored one-year research fellowships available. Conduct of the research is begun in the summer following the first year and is continued during free periods in the third and fourth years, often over vacations. A significant percentage of students (currently 55 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 previously 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 and funding may be obtained from the Office of Student Research, at 203.785.6633 or on its website, http://medicine.yale.edu/education/osr.

**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. Program 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 sciences, and will have had previous research experiences of a high caliber.

The goal of the M.D./Ph.D. Program at Yale 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, the Interdepartmental Neuroscience Program, and the departments of Applied Mathematics; Biomedical Engineering; Cell Biology; Cellular and Molecular Physiology; Chemistry; Experimental Pathology; Genetics; History of Science and Medicine; Immunobiology; Medical Anthropology; Microbiology; Molecular Biophysics and Biochemistry; Molecular, Cellular, and Developmental Biology; Neuroscience; and Pharmacology. Students interested in taking the joint degree in another department may be able to 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 of Arts and Sciences.
Applicants to the M.D./Ph.D. Program should be U.S. citizens or permanent residents. Applications by foreign nationals will be considered on a case-by-case basis. All applicants selected for admission currently receive support from the program for stipend, tuition, and health fees. 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 to eight years.

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

Students who have matriculated at Yale School of Medicine and are interested in applying to the M.D./Ph.D. Program should meet with Dr. Barbara Kazmierczak to discuss the internal application process. An important consideration for admission to the M.D./Ph.D. Program is adequate research experience. This will be assessed on a case-by-case basis. It may be necessary to complete a summer (or the equivalent in time) of research in a lab at Yale for an application to be considered. Applications for admission are reviewed by the same committee that evaluates outside applicants to the M.D./Ph.D. Program.

Beginning with students who matriculated in fall 2015, candidates for M.D./Ph.D. degrees will normally begin their thesis research after completing the first four terms of the School of Medicine curriculum. Students will 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 beginning 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. The integrated curriculum of clinical clerkships begins in January of the second year of medical school, and M.D./Ph.D. students participate in six months of clerkships prior to beginning Ph.D. work. After the student’s thesis defense, the student returns to the
medical wards to complete six months of integrated clinical clerkships and the final
twelve months of medical school. Only under unusual circumstances will students be
allowed to take more than six months of clerkships prior to beginning Ph.D. work. Stu-
dents are encouraged to take the twelve-week Medical Approach to the Patient integrated
clerkship and one other twelve-week integrated clerkship prior to beginning research.
This will enable the student to participate in outpatient clinical activities during disserta-
tion 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 Sci-
ence (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 Char-
table Foundation, the Howard Hughes Medical Institute-Yale Program, Yale NIH TL1
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 in Clinical Investigation; Organization and Leadership;
      Responsible Conduct of Research (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
      in Clinical Investigation; Organization and Leadership; Responsible Conduct of
      Research (during master’s year)

   These courses can be taken prior to the research year or during the research
   year.

   Additional electives are also required.
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 or online at http://medicine.yale.edu/education/research/mhs/instructions.aspx.

**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 at ysph.admissions@yale.edu 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 appropriate deans at each school to plan curriculum and find out if they qualify for the special tuition arrangement. Students at the Law School must petition for approval of a joint-degree program, and they may only petition after they have matriculated in Law School and completed their first term.

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 the student 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.

Yale 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 as a two-year program; as an eleven-month program for individuals with a doctoral-level (or international equivalent) degree in a field related to public health (e.g., physicians, dentists, veterinarians, attorneys, and those with a doctorate in the biological, behavioral, or social sciences), individuals with a master’s degree and at least two years of relevant work experience, individuals with a bachelor’s degree and at least five years of relevant work experience, and students who have completed their third year in an accredited medical, dental, or podiatric school in the United States; or as a five-year joint B.A.-B.S./M.P.H. program with Yale College. See the YSPH Bulletin for details on each degree program.

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-eight-month Yale program, established in 1970, is committed to educating students for generalist medical practice. As of December 2017, the Yale Physician Associate Program has graduated 1,236 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 Academic Program

The program is divided into a didactic phase of twelve months and a clinical phase of fourteen months. In addition, a research component is included in the clinical phase of the curriculum, with two one-month periods for research-related activities. The program provides a rich combination of medical courses and clinical experiences to ensure that Physician Associate students are prepared for their careers as professionals in interprofessional medical teams. Through problem-based learning, case studies, hands-on patient care, and research, the Yale Physician Associate students are well prepared to join hospitalist teams and private practices in both primary care and specialties.

A Master of Medical Science (M.M.Sc.) 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 include:
- Anatomy I, II, III
- Basic Science I, II, III
- Behavioral Medicine I, II, III
- Clinical Medicine I, II, III
- Diagnostic Studies I, II, III
- Patient Assessment I, II, III
- Pharmacology I, II, III
- Preparing Future PA’s I, II, III
- Research I, II, III

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 rotations 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 one rotation outside of New Haven or Connecticut. Students should expect to provide their own transportation and housing for all rotations away from New Haven. Students may also choose to broaden their experience by applying for international rotations. Students have chosen clerkships in China, Spain, Uganda, Rwanda, and Peru.

In order to graduate from the program, a student must successfully complete all rotations, summative evaluation using standardized patients, a written examination, and a thesis proposal. The thesis proposal 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**

- Emergency Medicine
- General Surgery
- Geriatrics
- Internal Medicine I
- Internal Medicine II
- Obstetrics and Gynecology
- Primary Care I
- Primary Care II
- Pediatrics
- Psychiatry

**ELECTIVE ROTATIONS**

- Ambulatory Medicine
- Anesthesiology
- Cardiology
- Cardiothoracic Surgery
- Dermatology
- Diagnostic Imaging/Radiology
- Endocrinology
- Gastroenterology
- Gynecologic Oncology
- Hematology
- Hospitalist Medicine
- Infectious Disease
- International Medicine
- Interventional Pulmonology
- Interventional Radiology
- Maternal-Fetal Medicine
- Medical Intensive Care
- Neonatology
- Nephrology
- Neurology
- Neurosurgery
- Occupational Health
- Oncology
- Orthopedics
- Otolaryngology
- Pediatric Cardiology
- Plastic Surgery
- Rheumatology
- Surgical Intensive Care
- Thoracic Surgery
- Transplant Surgery
- Trauma Surgery
- Urology

**Tuition and Fees**

Tuition for the Physician Associate program for the 2018–2019 academic year is $42,120 for first- and second-year students, and $14,040 for third-year students. Fees and other expenses—including books, supplies, and equipment; room and board; personal
expenses and transportation; Yale Health Hospitalization coverage; and travel to rotations— are estimated at an additional $30,028 for first-year students, $31,351 for second-year students, and $10,801 for third-year students. For more information, visit https://medicine.yale.edu/education/financialaid/paprogram/index.aspx#page2.

Admission to the Yale Physician Associate Program

The admissions process is highly selective and competitive. Selection is based on a multitude of factors including academic history, community or leadership involvement, patient care experience, and interpersonal effectiveness. For additional information regarding admissions, please visit the PA Program website at http://paprogram.yale.edu/admissions.

ACADEMIC

Students must have a baccalaureate degree prior to matriculation. 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 applicants must complete the following prerequisites: one semester of statistics or calculus, one semester of organic or biochemistry, one semester of anatomy with or without lab, one semester of animal or human physiology, one semester of microbiology, and one semester of genetics. Please visit http://paprogram.yale.edu/admissions/prerequisites/academic.aspx for further details. A cumulative science grade point average of 3.0 is required. The program considers Graduate Record Exam (GRE) scores (required) 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 PA 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, medical scribe, phlebotomist, or emergency medical technician. Experience need not be in a hospital setting. One thousand hours of direct, hands-on patient care experience is highly recommended to be considered for admission.

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 at http://paprogram.yale.edu/admissions/prerequisites/technical.aspx.
APPLICATION FOR ADMISSION

The application deadline for the class entering in August 2019 is September 1, 2018. Program information is available on the PA Program website, http://paprogram.yale.edu/admissions/apply.aspx. Online applications for admission are processed through the Centralized Application Service for Physician Assistants (CASPA) at www.caspaonline.org. The program also requires a supplemental application.

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

The M.M.Sc./M.P.H. joint-degree program at Yale 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 needed 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, or Health Policy.

Applicants must apply for admission and be accepted to both the Physician Associate Program and the Yale School of Public Health during concurrent admissions cycles. 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 PA Program and the School of Public Health as early as possible. For individuals granted an interview with the PA Program, the School of Public Health will expedite the review of the application.

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.

YALE PHYSICIAN ASSISTANT ONLINE PROGRAM

Yale University’s strategy for digital education is to prioritize initiatives that (1) use technology to improve teaching and learning at Yale University; and (2) amplify the impact of the great teaching at Yale beyond the campus. In pursuing these objectives, Yale seeks ideas that introduce pedagogical innovation and experimentation. In doing so, digital education initiatives benefit teaching and learning across the campus, while also advancing a school’s, center’s, or department’s educational objectives.

The Physician Assistant (PA) Online Program assists the University in meeting all of these goals. This program extends the great teaching at Yale beyond the local area, revolutionizes PA education, and advances the PA program’s goals.

The concept of a physician assistant was first developed in 1965. Today the Physician Assistant is a highly valued member of the health care team. They 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-eight-month PA Online Program is committed to educating students for primary care medical practice.
In September 2017 the Yale School of Medicine Physician Assistant Online Program was granted Accreditation–Provisional status from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The inaugural class began their full-time studies in January 2018 (see roster of forty-two students in the chapter Enrollment for 2017–2018).

Accreditation–Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program’s ability to meet the ARC-PA Standards, or when a program holding Accreditation–Provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.

**Mission of the Yale Physician Assistant Online Program**

The mission of the Yale Physician Assistant (PA) Online Program is to prepare PAs to provide compassionate, high-quality, patient-centered care as members of interdisciplinary teams in a primary care setting. Graduates will be culturally competent clinicians who are committed to continuous learning and professional development. Our graduates will make significant contributions to their communities and to the advancement of the PA profession.

**Vision of the Yale Physician Assistant Online Program**

The vision of the Yale Physician Assistant Online Program is to strive to be the national leader in innovative PA education and to prepare physician assistants of the highest quality to practice medicine as part of the health care team.

**Curriculum Structure of the Yale Physician Assistant Online Academic Program**

The program is divided into a didactic phase of twelve months (including two mandatory on-campus immersions, both one week in length) and a clinical phase of sixteen months (including a capstone month and one mandatory on-campus immersion, one week in length). A research component, in the form of a capstone, is incorporated into the clinical phase of the curriculum over a single four-week rotation period. The program provides a rich combination of medical courses and clinical experiences to ensure that PA students are prepared for their careers as professionals in interprofessional medical teams. Students begin their Clinical Experience in Early Didactic (CEED) immediately following their first on-campus immersion. Through problem-based learning, case studies, hands-on patient care in CEED, and the capstone, the Yale PA Online students are well prepared to join health care teams across the country to meet the ever-increasing demand for primary care providers.

A Master of Medical Science (M.M.Sc.) degree is awarded upon completion of the program.
THE DIDACTIC PHASE

The didactic year will consist of two mandatory on-campus immersions and a series of courses that are spread out over the course of the twelve months. The organ system approach will be used, with pediatrics, emergency medicine, and geriatrics being included across each system. The following is a summary of the courses and credit hours:

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Anatomy I</td>
<td>3</td>
</tr>
<tr>
<td>Human Anatomy II</td>
<td>3</td>
</tr>
<tr>
<td>Human Anatomy III</td>
<td>3</td>
</tr>
<tr>
<td>Basic Science I</td>
<td>2</td>
</tr>
<tr>
<td>Basic Science II</td>
<td>2</td>
</tr>
<tr>
<td>Basic Science III</td>
<td>2</td>
</tr>
<tr>
<td>Patient Assessment I</td>
<td>3</td>
</tr>
<tr>
<td>Patient Assessment II</td>
<td>3</td>
</tr>
<tr>
<td>Patient Assessment III</td>
<td>3</td>
</tr>
<tr>
<td>Diagnostic Studies I</td>
<td>1</td>
</tr>
<tr>
<td>Diagnostic Studies II</td>
<td>1</td>
</tr>
<tr>
<td>Diagnostic Studies III</td>
<td>1</td>
</tr>
<tr>
<td>Clinical Medicine I</td>
<td>5</td>
</tr>
<tr>
<td>Clinical Medicine II</td>
<td>5</td>
</tr>
<tr>
<td>Clinical Medicine III</td>
<td>5</td>
</tr>
<tr>
<td>Pharmacology I</td>
<td>3</td>
</tr>
<tr>
<td>Pharmacology II</td>
<td>3</td>
</tr>
<tr>
<td>Pharmacology III</td>
<td>3</td>
</tr>
<tr>
<td>Behavioral Medicine I</td>
<td>1</td>
</tr>
<tr>
<td>Behavioral Medicine II</td>
<td>1</td>
</tr>
<tr>
<td>Behavioral Medicine III</td>
<td>1</td>
</tr>
<tr>
<td>Preparing Future PAs I: PA Practice</td>
<td>1</td>
</tr>
<tr>
<td>Preparing Future PAs II: EBM</td>
<td>1</td>
</tr>
<tr>
<td>Preparing Future PAs III: Bioethics</td>
<td>1</td>
</tr>
</tbody>
</table>

Total credits 57

THE CLINICAL PHASE

Each student completes fifteen four-week rotations, with an emphasis on internal medicine and primary care. One additional four-week block during the clinical phase is reserved as the capstone month. There are three four-week elective rotations and one final mandatory on-campus immersion.

The majority of the rotations will be in the student’s local geographic area, although there may be some opportunities for elective rotations in other geographic areas. Students are expected to provide their own transportation to and from all rotations and for all immersions. These expenses are calculated into the student budget.
CLINICAL ROTATIONS AND CAPSTONE

Internal Medicine I, II, and III (12 weeks; 12 credits)
Primary Care I, II, and III (12 weeks; 12 credits)
Behavioral Medicine (4 weeks; 4 credits)
Pediatrics I and II (8 weeks; 8 credits)
General Surgery (4 weeks; 4 credits)
Women’s Health (4 weeks; 4 credits)
Emergency Medicine (4 weeks; 4 credits)
Electives (12 weeks; 12 credits)
Master’s Capstone (4 weeks; 1 credit)

Total credits, 61

Graduation Requirements

In order to graduate from the PA Online Program, a student must successfully complete their didactic year (57 credits), all clinical rotations and the Master’s Capstone (61 credits), summative evaluation using standardized patients, and a written final cumulative examination.

Tuition and Fees

Tuition for the PA Online Program for the 2018–2019 academic year is $14,040 per term. For first-year students who begin their studies in January 2019, the tuition is approximately $42,120 for three terms of tuition. Second-year students can expect to remit approximately $42,120 for three terms of tuition, and third-year students remit $14,040 for one term of tuition. First-year and second-year students should expect a slight increase in tuition for their fall terms. Activity fees, technology fees, and other expenses—including books and supplies; equipment; room and board; personal and transportation expenses; hospitalization coverage and miscellaneous medical expenses; and travel to rotations—are estimated at an additional $26,340 for first-year students, $27,900 for second-year students, and $9,040 for third-year students. For more information see https://paonline.yale.edu/admissions/financial-aid.

Admission to the Yale Physician Assistant Online Program

Admission selection to the January cohort is based on a multitude of factors including academic history, community or leadership involvement, patient care experience, and interpersonal effectiveness. For additional information regarding admissions, please visit the PA Online Program website at https://paonline.yale.edu/admissions.

ACADEMIC

Students must have a baccalaureate degree prior to matriculation. 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 applicants must complete the following prerequisites either in a quarter or semester system: 3–5 credits in statistics or calculus, 3–5 credits in organic or
biochemistry, 3–5 credits in human anatomy with or without lab, 3–5 credits in animal or human physiology, 3–5 credits in microbiology, and 3–5 credits in genetics. Please visit https://paonline.yale.edu/admissions/prerequisites for detailed descriptions of the courses required. A cumulative science grade point average of 3.0 is required. A cumulative undergraduate GPA of 2.8 is also required. Official Graduate Record Exam (GRE) scores (required) and performance in science courses are some of the indicators of academic success examined by the Admissions Committee.

EXPERIENCE

Applicants must have some awareness of the intricacies of health care delivery and demonstrate their commitment to the PA profession. While experience is not required, any hands-on health care experience does make an applicant more competitive and will reinforce the applicant’s commitment to the field. Some examples of experience include working as an emergency medical technician, nurses’ aide, or medical scribe. Experience can be in a variety of health care settings.

INTERPERSONAL

The program values the ability to work competently, maturely, conscientiously, and with empathy within a team setting. The Admissions Committee reviews letters of recommendation and screens applicants to determine their career commitment, interpersonal skills, and willingness to work with the supervision of a physician. All admissions interviews are conducted online.

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 at https://paonline.yale.edu/admissions/technical-standards.

APPLICATION FOR ADMISSION

The early decision deadline for the January 2020 cohort is April 15, 2019. The priority application deadline is July 1, 2019. And the final application deadline is September 1, 2019. The application is accessible through the PA Program website, https://apply.paconline.yale.edu/signup.

CERTIFICATE IN GLOBAL MEDICINE

The Certificate in Global Medicine is awarded upon graduation to Yale School of Medicine students who demonstrate competence in global health and provides recognition that a student has completed required didactic course work, scholarly work, global health clinical experience, and language, culture, and leadership activities relevant to global health. This certificate allows students to develop expertise and prepares students for leadership in global health by providing the knowledge, skills, and attitude essential for success in this field. In addition to directly benefiting students at Yale, this program will establish the Yale School of Medicine as a model for excellence in global health education. Requirements for earning the certificate can be completed over four (or five) years, while maintaining flexibility in terms of both the timing and content of these opportunities.
It is expected that students pursuing the certificate will engage with the community of practitioners and scholars working on global health at Yale and around the world. International field experience in global health is an integral part of the program.

Additional information is available at http://medicine.yale.edu/globalhealth/yale/global-certificate.aspx.
Expenses and Financial Aid

TUITION AND SPECIAL FEES

Tuition for candidates for the M.D. degree (per academic year) $61,140
Yale Health Hospitalization coverage and miscellaneous medical expenses $2,578

Examination fees for candidates for the M.D. degree:

United States Medical Licensing 2018–2019
- Step I and Step II – Clinical Knowledge $1,220
- Step II, Part II – Clinical Skills $1,285
- Travel to USMLE Step II–Clinical Skills $1,052

Student accounts, billing, and related services are administered through the Office of Student Financial Services; see Student Accounts and Bills, below.

Students must pay four full years of tuition. Students who spend five years in medical school at Yale either take a fifth year to do extended study or may request to take a leave of absence. Both require the approval of the associate dean for student affairs.

Tuition payment options for fifth-year students (Extended Study) (1) pay full tuition for four consecutive years and a registration fee for the chronological fifth year; (2) pay split tuition and the registration fee over a two-year period. Students will pay one-half of the current rate of tuition and one-half of the registration fee each year. The total amount will be charged in two installments, for each term; (3) students enrolled in a joint-degree program at another Yale professional school will pay the required tuition of the other degree program to that school and no tuition or registration fee to the School of Medicine. Students will pay the required amount of tuition to the School of Medicine in the next academic year. Students will apply for financial aid at the other school; (4) students enrolled in a dual-degree program at an away institution will pay the required tuition of the other degree program to the away school and pay the registration fee to the School of Medicine. Students will pay full tuition to the School of Medicine in the next academic year. Students will apply for financial aid at the away institution.

Tuition payment options for students who take a leave of absence 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 take a leave of absence in the middle of any year, full tuition will be charged for that year and a registration fee for the following year.

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 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. Any students who are in the program after six years will pay a minimal registration fee to the school they are attending. (Students are responsible for their own health insurance.)

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.

Students who are asked to repeat one or more years of course work because of academic failure in curriculum requirements will pay 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 cost of $86,647, 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. Each medical student must have special equipment for individual courses.

All students are required to pay a $565 Activity Fee. If a student is enrolled beyond the fourth year, a $282.50 Activity Fee is charged. All students are required to pay an annual $450 Technology Fee.

Upperclassmen are reminded that they should anticipate the expenses of travel for interviews related to internship applications and also the cost of 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 office’s website is http://student-accounts.yale.edu.

**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. Yale does not mail paper bills.

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 Time on the first business day of the following month. E-mail notifications that the account statement is available on the University eBill-ePay website (http://student-accounts.yale.edu/ebep) are sent to all students at their official Yale e-mail addresses and to all student-designated
proxies. Students can grant others proxy access to the eBill-ePay system to view the monthly student account statements and make online payments. For more information, see http://sfas.yale.edu/proxy-access-and-authorization.

Bills for tuition, room, and board are available 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.

Payments
There are a variety of options offered for making payments. Yale University eBill-ePay (http://student-accounts.yale.edu/ebep) is the preferred means for payment of your monthly student account bill. The ePayments are immediately posted to the student account. There is no charge to use this service. Bank information is password-protected and secure, and a printable confirmation receipt is available. On bill due dates, payments using the eBill-ePay system can be made up to 4 p.m. Eastern Time in order to avoid late fees.

For those who choose to pay the student account bill by check, a remittance advice and mailing instructions are included with the online bill available on the eBill-ePay website. All bills must be paid in U.S. currency. Checks must be payable in U.S. dollars drawn on a U.S. bank. Payments can also be made via wire transfer. Instructions for wire transfer are available on the eBill-ePay website.

Yale does not accept credit card 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, late fees of $125 per month will be charged for the period the bill was unpaid, as noted above.
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 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 25. Additional details concerning the Yale Payment Plan are available at http://student-accounts.yale.edu/ypp.

**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 supplies, health insurance, personal and transportation, technology fee, student activity fee, 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 students may not receive Title IV funds (Federal Direct Unsubsidized Loan) unless they have executed a Statement of Registration Compliance (SRC) that either confirms that the individual has registered for Selective Service or states the reason why the student 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 CSS Profile, and includes money from the student’s own resources (assets, salaries, etc.), from the spouse and/or fiancé’s income, when applicable, and from a parent contribution. The difference between the amount for which the family 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 bulletin 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 the student 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, the student’s 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 parent contribution. 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.

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, the student’s 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 parents’ and student’s (and spouse/fiancé’s, if applicable) tax returns, including all schedules and W-2 forms or a statement of earnings for the previous fiscal year are required for all students applying for Yale Loans and Scholarships. Copies of Social Security benefits, unemployment compensation, and retirement benefits of both
student and parents are also required. All information is verified in accordance with federal regulations. If the parents are divorced, the student must provide information on the custodial parent. The custodial parent will remain the same for all subsequent years; a student cannot change custodial parents unless the original custodial parent dies. If the custodial parent is remarried, the stepparent’s information is also required.

All information in individual student financial aid applications 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 2018–2019 all students who have a calculated loan need and who are U.S. citizens or permanent residents of the United States may borrow through the Federal Direct 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 website at http://medfinaid.yale.edu.

**MEDICAL STUDENT FAMILY SUPPORT AND HEALTH CARE**

Yale School of Medicine provides health insurance for the families of medical students who have children under twenty-six years of age. This includes full health care coverage at Yale Health for all medical students and their children (basic as well as hospitalization/specialty care). A full description of the coverage can be found on the Yale Health website at http://yalehealth.yale.edu and in this bulletin under Health Services in the chapter Yale University Resources and Services.

Medical students with a child of any age will receive an annual subsidy of $4,500. If a student has family coverage through Yale Health that includes spousal coverage, the $4,500 will automatically be applied toward spousal coverage. Otherwise, parents can best decide how to use this funding—for child care, spousal coverage elsewhere, or any other family expense.

Additionally, medical students will receive an annual subsidy of $1,000 for each additional child under the age of six.

The subsidy is one per family, not one per enrolled student. The School of Medicine will prorate the M.D. Student Family Support subsidy with a birth or adoption event.

For information on the possible effects of the subsidy on financial aid awards, contact the director of financial aid at nkenge.haines@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 2018–2019, the last days for refunding federal student aid funds will be October 22, 2018 (Year 1), October 31, 2018 (Year 2), October 25, 2018 (Year 3), and November 2, 2018 (Years 4 and 5) in the fall term; and April 11, 2019 (Year 1), May 15, 2019 (Year 2), May 13, 2019 (Years 3 and 5), and March 23, 2019 (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: August 21, 2018 (Year 1), September 14, 2018 (Year 2), August 24, 2018 (Year 3), and August 16, 2018 (Years 4 and 5) in the fall term; and January 16, 2019 (Year 1), January 29, 2019 (Year 2), January 23, 2019 (Years 3 and 5), and January 15, 2019 (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 9, 2018 (Year 1), September 28, 2018 (Year 2), September 12, 2018 (Year 3), and September 16, 2018 (Years 4 and 5) in the fall term; and February 8, 2019 (Year 1), March 1, 2019 (Year 2), February 25, 2019 (Years 3 and 5), and February 4, 2019 (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 a term but on or before the day of midterm: October 10, 2018 (Year 1), October 22, 2018 (Year 2), October 13, 2018 (Year 3), and October 20, 2018 (Years 4 and 5) in the fall term; and March 27, 2019 (Year 1), April 24, 2019 (Year 2), April 21, 2019 (Years 3 and 5), and March 10, 2019 (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 Direct Unsubsidized Loans, if any; then to Federal Perkins Loans; Federal Direct Graduate PLUS Loans; 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 instructions on completing this process from Yale Student Financial Services.

This schedule applies only to the School of Medicine. Contact the School of Public Health, the Physician Associate Program, and the Physician Assistant Online 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.

The Jan Paul Abshire Scholarship Fund  Established in 2014 by Jonathan Abshire. Preference for veterans of the United States Navy, Air Force, Army, or Marines, or mid-career students who are studying epidemiology.

The 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 female medical students.

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

The Anonymous Public Health Scholarship Fund  Established in 2014 by an anonymous donor to provide scholarships for students within the Yale School of Public Health with a preference for students interested in public health policy and law.


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 School of Medicine.

The Muriel Frances Hanley Bagshaw, M.D. Scholarship Fund  Established in 2000 by Malcolm A. Bagshaw, M.D. 1950, in memory of his wife to assist one or more female students enrolled in the Yale School of Medicine.

The Donald S. Baim, M.D. 1975, Scholarship Fund  Established in 2011 by Boston Scientific Corporation in memory of Donald S. Baim, M.D. 1975, to provide scholarship assistance for Yale School of Medicine students pursuing medical doctor degrees.

The Judson Bardwell, 1891 M.D., Memorial Scholarship Fund  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 students planning careers in the health care profession.

The M. Grant Blakeslee Memorial Scholarship Fund  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 Bohmfalk Scholarship Fund  The John Frederick Bohmfalk Scholarship Fund and the Alice Bohmfalk Scholarship Fund support students planning careers in general practice or the equivalent.

The Harold D. Bornstein, Jr., M.D. ’53, Medical Scholarship Fund  Established in 2011 by Harold D. Bornstein, Jr., M.D. ’53, to provide scholarships for Yale School of Medicine students in good academic standing with need for financial aid.

The John E. Borowy, M.D. ’50, and Ruth Borowy Scholarship Fund  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 Fund in Medicine  Established in 2003 by bequest from Victor Joseph Burner, B.A. 1959, M.D. 1965, to be awarded to qualified students attending the Yale School of Medicine who meet the requirements for need-based financial aid.

The Edward Thomas Calhoun Scholarship Fund  Established in 1928 by Lida T. Calhoun in memory of her son, Edward Thomas Calhoun, M.D. For work in pathology.

The Robert E. Carroll, M.D. Yale School of Medicine Scholarship Fund  Established in 2007 with a gift from Robert E. Carroll, B.A. 1938, M.D. 1942, 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 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. To provide scholarship assistance for the benefit of medical students.

The Class of 1948 Scholarship Fund  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 1955 Scholarship Fund  Established in 2011 by David R. Kessler, M.D. ’55, in honor of his classmates and to provide scholarships for Yale School of Medicine students pursuing an M.D. degree.

The Class of 1956 Scholarship Fund  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 Fund  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 1958 Medical School Scholarship Fund  Established in 2014 by members of the Class of 1958 Medicine to provide scholarship support for one or more outstanding students in the M.D. program with need for financial aid.

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 Fund  Established in 2002 by members of the Class of 1961 Medicine to support medical students.

The Class of 1963 Scholarship Fund  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 Fund  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 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 Paul D. Cleary Scholarship Fund  Established in 2016 by Troyen A. Brennan, M.D./M.P.H. 1984, and Dr. Amy Kyle and other donors to provide scholarships for students within the Yale School of Public Health. Preference for students pursuing a Ph.D.
The Sidney M. and Phyllis D. Cohen Scholarship Fund  Established in 2012 by Sidney M. Cohen, M.D. for Yale School of Medicine students pursuing an M.D. degree.

The Jack W. Cole Scholarship Fund  Established in 2010 in memory of Dr. Jack W. Cole, founder of the Physician Associate Program at Yale, by his wife and family to provide scholarships for Yale School of Medicine students enrolled in the Physician Associate Program.

The Thomas J. Coleman III, M.D. and Bebette Gualano Coleman Scholarship Fund  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 Courture Family Scholarship Fund for Yale College/Public Health  Established in 2012 by Peter J. Courture to provide scholarships to outstanding students, with a preference for students in the B.A./B.S.-M.P.H. Program in Public Health or other Yale College graduates.

The Crawford Family Scholarship Fund  Established in 2016 by William C. Crawford, B.A. 2001, to provide scholarships for students within the Yale School of Public Health. Preference for students in the B.A.-B.S./M.P.H. program or other Yale College alumni.

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

The Lycurgus M. Davey Scholarship Fund  Established in 1986 by a gift from Lycurgus M. Davey, M.D. 1943. To be used for financial aid to gifted and needy medical students.

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

The Donabedian Family Term Scholarship Fund  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.

The 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.

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

The John Sinclair Dye Memorial Scholarship Fund  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 Alvan R. Feinstein, M.D. Scholarship Fund  Established in 2016 by Bernard P. Schachtel, M.D. (B.A. 1966) to provide scholarships for students at the Yale School of Public Health.
The Richard N. and Catherine Foster M.D./Ph.D. Scholarship Fund  Established in 2012 by an anonymous donor. To provide scholarships and stipend support for medical students who are jointly pursuing M.D./Ph.D. degrees at Yale. Preference is given to students planning to pursue careers as physician scientists making use of both their clinical and scientific training.

The Alvin E. Friedman-Kien M.D. 1960 Scholarship Fund  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 School of Medicine.

The J. Roswell Gallagher Scholarship Fund  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 Fund  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 Nancy Galvani Memorial Scholarship Fund  Established in 2015 by a gift from Alison P. Galvani, M.A.H. 2014, to provide assistance to doctoral students at the Yale School of Public Health with a preference for students in the Center for Infectious Disease Modeling and Analysis.

The Anne G.K. Garland Memorial Scholarship Fund  Established in 1930 by a 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 Fund  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.

The Gladys Godfried Scholarship Fund  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 their third or fourth year.

The Gold Family Yale Medical Scholarship Fund  Established in 2011 by Janice R. Gold, ’78 M.P.H., and Mark S. Gold, M.D. to provide scholarships for Yale School of Medicine students in good academic standing with need for financial aid.
The James Raymond Goodrich Memorial Scholarship Fund  Scholarships are available in the School of Medicine from the income of a university scholarship fund established in 1923 by a 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 Fund Established in 2007 from the estate of Jack Peter Green, Ph.D. 1952, M.D. 1957, and his wife to support promising M.D./Ph.D. students at the Yale School of Medicine.

The Maurice R. Greenberg Scholarship Fund Established in 2014 by the Starr Foundation in honor of Maurice R. Greenberg to award scholarships to students with demonstrated financial need at the Yale School of Medicine.

The George D. Gross, M.D. Scholarship Fund 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 Fund 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 Susan and William H. Hindle, M.D. Scholarship Fund Established in 2010 by William H. Hindle, M.D. 1956, and his wife, Susan, to provide scholarship assistance to Yale School of Medicine students pursuing an M.D. degree.

The Muriel Hirshfield Memorial Scholarship Fund 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 Connecticut, with preference given to 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 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 Kehayes Memorial Scholarship Fund  Established in 2012 by Philip Head and I. Naya M. Kehayes to provide scholarships for outstanding students, with a preference for students in the Division of Health Policy and Administration.

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 Louise F. Klock Scholarship Fund  Established in 2011 with a gift from the Salem Shuchman and Barbara Klock Family Foundation to provide scholarships for Yale School of Medicine students pursuing an M.D. degree, with a preference for students who are parents.

The Dr. David and Colleen Leof Scholarship Fund  Established in 2010 by David Leof, M.D. 1964, and his wife, Colleen, to provide financial support for a Yale School of Medicine student, preferably with distinction in the humanities or the arts.

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 Frank E. Lucente Scholarship Fund  Established in 2016 by Frank E. Lucente, M.D. 1968, to provide scholarships for students within the Yale School of Medicine.

The John C. Marsh, M.D. '59 Scholarship Fund  Established in 2015 by a gift from John Marsh, M.D. 1959, to provide financial aid assistance for first-year students.

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. Income to be used to provide scholarships for financially needy first-year medical students who have demonstrated a proficiency and interest in biochemistry or physiological chemistry.

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

The Anoush Miridjanian, M.D. Scholarship Fund  Established in 2011 by Anoush Miridjanian, M.D. 1961, to provide scholarships for Yale School of Medicine students, with a preference for students of Armenian descent.
The Bernadette M. Mosellie Scholarship Fund  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.

The Julian J. Obermann Fund  Established in 1959 by bequest from Julian J. Obermann, honorary M.A. 1935. To be used and applied to defray the costs of tuition and expenses of needy and deserving students in the School of Medicine.

The John and Jessie Ogilvie Memorial Scholarship Fund  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 Raymond E. Parks, M.D. 1945, Medical Scholarship Fund  Established in 2014 by the bequest of Mrs. Raymond E. Parks in honor of her late husband, Raymond E. Parks, M.D. This fund shall be used to provide scholarships for Yale School of Medicine students pursuing an M.D. degree and in good academic standing with the need for financial aid.

The David V. Pecora, M.D. 1941, and Dorothy E. Pecora, R.N., Scholarship Fund 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 Positano Family Scholarship Fund  Established in 2016 by a gift from Dr. Rock C. Positano, M.P.H. 1989, to provide assistance for students at the Yale School of Public Health.

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 Fund  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 an accident weeks before she would have graduated. She had planned on a career in emergency medicine.

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

The Dr. Irwin K. and Dr. Barbara F. Rosenberg Medical Student Scholarship Fund  Established in 2017 from the trust of Dr. Irwin K. Rosenberg to support students in the M.D. program with demonstrated need for financial aid.

The Nathan E. and Hilda M. Ross Scholarship Fund  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 Peter Salovey and Marta Elisa Moret ’84 M.P.H. Scholarship Fund  Established in 2015 as a gift from Yale’s president, Peter Salovey, and his wife, Marta Moret, M.P.H. 1984, to provide assistance to students with a preference for those who are from historically underrepresented communities or who have demonstrated a commitment to the importance of diversity in the health professions.

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*.

The Schley Family Scholarship Fund  Established in 2011 by Mary Wheatland Schley, M.D. 1952, to provide scholarships for Yale School of Medicine students pursuing an M.D. degree.

Scholarships for Disadvantaged Students  Established by the university to provide financial assistance to needy medical students.

The Donald H. Sheridan Scholarship Fund  Established in 1986 by bequest from Kathryn Whitelam Wynn in memory of her husband, Donald H. Sheridan. To be used for scholarships to needy medical students.

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 is 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 Fund  Established in 1977 in memory of Dr. Reuben E. Thalberg and awarded to a medical student in need of financial aid while attending the Yale School of Medicine.

The Charles Henry Thomas Scholarship Fund  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 Fund  Established in 2001 by Dr. and Mrs. Top and awarded each year to one or more medical students.

The Joseph Hendley Townsend Scholarship Fund  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 is to be used for scholarship aid for a New Haven resident.

The Tremonti Family Scholarship Fund  Established in 2010 by Lawrence Tremonti, M.D. 1963, to provide scholarships for Yale School of Medicine students pursuing an M.D. degree with preference for a student from a small liberal arts school.

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  Established in 1927 by gifts from Joseph C. Johnson and other friends of Flora Adler Ullman for scholarship aid.

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

The Robert R. and Mary B. Wagner Scholarship Fund  Established in 2014 by Robert R. Wagner. This scholarship shall be awarded to a School of Medicine student each year.

The Alfred Eastman Walker Scholarship Fund  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 Fund  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.

The Andrew Judson White Scholarship Fund  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.

The Dr. Colin White Memorial Scholarship Fund  Established in 2012 by Allan G. White in memory of his father to provide scholarships for outstanding students with a preference for students in the Department of Biostatistics in the School of Public Health.
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 Fund  Established in 1990 by Amy Hunter Wilson, M.D. 1930, D.P.H. 1934, and Frederick C. Wilson to provide financial assistance to needy medical and public health students.

The Louise Farnam Wilson Memorial Scholarship Fund  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 female student.

The Donald D. Wright, 1930 B.A., 1933 Ph.D. (Chemistry) Scholarship Fund  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, the chemistry major adviser at Brooklyn College who encouraged the best and brightest 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 of the City University of New York system.

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.

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

The Jack R. Aron Loan Fund  Established in 1980 by a gift 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 a 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, Ph.D. 1931, M.D. 1934.

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 a gift from H.P.J. Duberg, B.A. 1930.

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

The C.S.M.S. Memorial Student Loan Fund  Established in 1972 to provide supplemental loans up to $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.

The 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.

The Howard Heinz Students’ 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 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 Program Fund  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 education.

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 School of Medicine, in memory of their son, Anson Frederick Smolowe, B.S. 1964.

The Wayne O. Southwick 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 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 Arons-Millard Student Research Fund for Surgery  Established in 2014 by M. Felix Freshwater, M.D. for medical student summer thesis research fellowships with a priority first in the history of surgery, then in clinical aspects of plastic surgery.

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 to promising investigators for pursuit of research in the medical sciences, including clinical medicine and public health.

The Alexander Brown Coxe Memorial Fellowships in the Biological Sciences  Established in 1927 by a gift from the family of 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 an M.D. or Ph.D. degree.
The Committee on International Health Fellowship  The Committee on International Health was established by the Department of Epidemiology and Public Health in 1965. In 1988, this fellowship was established in honor of Wilbur G. Downs, M.D., M.P.H., an eminent medical scholar renowned for his work in international health. The committee selects students studying diseases such as malaria; the fund provides travel fare and a small stipend.

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 (Yale College Class of 1927), for research in surgery.

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 Joseph W. Eichenbaum, M.D. ’73, Endowment for Student Research  Established by Joseph W. Eichenbaum, M.D. to support the summer research of a highly motivated M.D. student with an interest in the basic sciences, and under the direction of an established faculty member who has a history of providing an extraordinary mentoring and research experience for M.D. students.

The John F. 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 medical research fellowships for students and faculty.

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 student research projects related to endocrinological aspects of cancer.

The Richard K. Gershon, M.D. Student Research Fellowship  Established in 1986 by faculty and friends in honor of Richard K. Gershon, M.D. 1959, to support a medical student for a fifth year of medical school 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 from four to five years to pursue research projects.

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 provide medical students who are promising scientists with research fellowships in clinical virology and related projects in viral pathogenesis.

The Charles Linnaeus Ives Fellowship Established in 1924 by bequest from the widow of Charles Linnaeus Ives, B.A. 1852, for student 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 faculty investigators whose research shows great promise.

The Geraldine Lambert Fellowship Fund  Established in 2014 by Caren S. Lambert ’89 B.A. to create and support a fellowship program to train the next generation of physicians/physician scientists who will devote their energies to the clinical and scientific understanding of dyslexia and its treatment, especially dyslexia in children.

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 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.

The Lo Family Graduate Fellowship  Established in 2011 by Dr. Ka Shui Lo P’05 and Dr. Feli Lo P’05 for the benefit of one or more senior graduate students pursuing stem cell research at Yale School of Medicine. The student should be a Ph.D. or an M.D./Ph.D. candidate.

The Madden Fellowship  Established in 2015 by a gift from Edward E. Madden, B.A. 1962, to support a fellow at Yale Cancer Center.

The Richard A. Moggio, M.D., Student Research Fellowship  Established in 1996 by Richard A. Moggio, M.D. to support medical students in their original research efforts toward the completion of their thesis requirement.

The Peter R. Muehrer Scholarship Fund  Established in 2017 by Peter R. Muehrer, M.D. (B.A. 1982 B.A.) to provide support for postdoctoral fellows within the National Clinician Scholars Program. Preference for fellows who have demonstrated an interest in integrating research or clinical care for mental disorders into their studies.
The Office of International Medical Student Education Fellowship Established in 2015 by a gift from Simeon A. Schwartz, M.D. 1977, to support the international elective travel fellowship for medical students.

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

The Gustavus and Louise Pfeiffer Research Foundation Fellowship Established in 2015 by a gift from the Gustavus and Louise Pfeiffer Research Foundation to support M.D./Ph.D. students matriculating in the Yale School of Medicine M.D./Ph.D. program with a preference for students who are pursuing Ph.D. research in neuroscience or a closely related field.

The 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 wife, parents, four sisters, brother (Morris, Yale Class of 1938), and his two 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 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 George G. Posener in memory of his wife, Leah, and his brother, Morris (Yale Class of 1938), who received care at Yale New Haven Hospital. To be awarded annually to assist a young physician/scientist whose research focuses on polycythemia vera and related blood diseases and also to support stem cell research.

The Bertram Roberts Memorial Fund 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.

The 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.

The Robert Shapiro, M.D., Memorial Fellowship in Diagnostic Radiology Established in 2000 to provide research support in all diagnostic interventional procedures for post-doctoral 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 Taylor Opportunity Student Research Fellowship Established in 2007 by Robert F. Taylor, M.D. to support the short-term or summer research of a highly motivated medical student with an interest in the basic and/or clinical sciences, under the direction of a
dedicated faculty member who is committed to providing an extraordinary mentoring and research experience for medical students.

**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 faculty 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 faculty 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 in the areas of diabetes, stroke, and heart disease.

**The 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.

**The Yale-Uganda Endocrine Surgery Fellowship Program Fund** Established in 2017 by Laticrete International, Inc. to support a general surgeon from Uganda who will spend three to four months in training with the endocrine surgery team at Yale School of Medicine. In addition, surgeons from the Section of Endocrine Surgery will travel to Uganda to work alongside the fellow and other doctors to provide training, mentoring, and patient care.

**The Herman H. and Sarah Zusman Student Research Fellowship** Established in 2009 by the Zusman family to support the 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 2018

Cum laude  The degree of Doctor of Medicine cum laude will be conferred on students whose academic performance shows unusual merit. Hannah Zornow Alter, Alexander Reza Bazazi, Benoit Cyrenne, Katherine Abigail Epstein, Charuta Gavankar Furey, David William Goldstein, Simon Matthew Gray, Melody Yin Hu, Nicole Krenitsky, Valerie Luks, Alexandria Marino, Goran Mi´ cevi´ c, Nathaniel Thomas Ondeck, Max Christian Petersen, Ronnye Rutledge, Alyssa Raven Thomas, Andrew Thomas Timberlake, Karri Weisenthal, Tina Xia, Ava Chwan Lee Yap, Nicole Sitkin Zelin

American Academy of Neurology Award  Awarded to recognize a graduating medical student for excellence in clinical neurology. Jeremy Paul Ader

ACP 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. Urs Michael Weber

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. Eamon Yeats Duffy, Clara Kim, Talia Robledo-Gil, Robert Michel Rock, Karri Weisenthal

The Campbell Prize  Founded in 1900 by bequest from James Campbell, honorary M.A. 1891, Professor of Obstetrics and Gynecology from 1886 to 1899. Awarded to the graduating student who secures the highest score on Step II of the National Board Medical Examination. Marcus Altman

Connecticut Academy of Family Physicians Award  Established in 1994 to recognize outstanding students entering a career in Family Practice. Not awarded in 2018.

Connecticut Chapter of American College of Surgeons Prize  Awarded to a graduating student for excellence in surgical sciences. Carla Marisa Lopez

The Cortlandt Van Rensselaer Creed Award  Established in 1999 in honor of Cortlandt Van Rensselaer Creed, the first African American graduate of Yale School of Medicine in 1857. Awarded through peer nomination to a graduating, underrepresented, minority student in medicine and public health who has demonstrated outstanding academic achievement, exemplary leadership, and a significant commitment to the community at large. Marquita Nicole Kilgore-Nolan, Robert Michel Rock

Miriam Kathleen Dasey Award  Established in 1950 in honor of Miriam Kathleen Dasey, Registrar from 1921 to 1950. Awarded annually to students who by strength of character, personal integrity, and academic achievement give promise of fulfilling the ideal of the compassionate physician. Dipankan Bhattacharya, Charuta Gavankar Furey, John Christian Grotberg, Melody Yin Hu, Talia Robledo-Gil, Robert Michel Rock, Andi Shahu
The Dean’s Prize for Community Service  This annual award recognizes the graduating student who, by leadership and service, has made major contributions to the School of Medicine, to the New Haven community, or to the community at large. Hannah Zornow Alter, Juliana Pearl Berk-Krauss, Eamon Yeats Duffy, Tehreem Rehman, Robert Michel Rock

Endocrinology Society Medical Student Achievement Award  Established in 1997 to recognize a graduating student who has shown special achievement and interest in the general field of endocrinology. Max Christian Petersen

The Selma and Karl Folkers Prize in Biomedical Research  Awarded to graduating M.D./Ph.D. students whose thesis research has demonstrated excellence in basic cell and molecular biology. Goran Mićević, Marco Antonio Ramos, Jr., Eleanor Varian Thomas, Genevieve Jia-Wei Yang

The Peter Grannum Prize  Established in 1990. Awarded to an outstanding African American graduate. This annual award is supported by the Shirley, Maggie and Hugh Comer Fund. Ronnye Rutledge

The Marguerite Rush Lerner Award  Awarded to students for outstanding creative writing. Alvin Li, Siyu (Sue) Xiao

The M.D./Ph.D. Alumni Award  Awarded to graduating M.D./Ph.D. students who have demonstrated outstanding academic achievements, leadership, and service. Amanda Ruth Quijano

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. Alexander Reza Bazazi, Simon Matthew Gray, Alexandria Marino

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.” Dipankan Bhattacharya, Robert Hsu-Wei Rosen, Alyssa Raven Thomas

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. Eamon Yeats Duffy, Charuta Gavankar Furey, Ido Haimi

The Perkins Prize  Awarded to the student who achieves the highest rank on Step I of the National Board Medical Examination. Marcus Altman

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. Réginald Sévère
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 academic excellence and contributions to the Connecticut Academy of Family Physicians and other organizations that promote understanding of the specialty of Family Medicine. Not awarded in 2018.

The Society for Academic Emergency Medicine Award
Awarded to the student who has demonstrated excellence in the specialty of emergency medicine. Karri Weisenthal

The Leonard Tow Humanism in Medicine Award
Supported by the Arnold P. Gold Foundation
Established to honor a graduating student who demonstrates the highest standard of compassion and sensitivity in interaction with patients. Marcus Altman

Lauren Weinstein Award
Established in 1992 in memory of Lauren Weinstein (Yale medical student, 1988–1989). Given to students who display courage, perseverance, and compassion and have dared to reach for the best in themselves. Alex Stewart, Chris A. Zirker

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. Goran Mićević

THEESIS PRIZES, MAY 2018

Cancer Prize
Awarded to a graduating student for an outstanding thesis in cancer. Benoit Cyrenne

The Peter F. Curran Prize
Established in 1976. To be presented to a graduating medical student for an outstanding thesis. Alyssa Raven Thomas

Wilber G. Downs, M.D., M.P.H., Outstanding Thesis Prize in International Health
Established in 1988 for the best thesis in the area of international health. Ava Chwan Lee Yap

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. Valerie Luks

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. Charuta Gavankar Furey

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. Nicole Sitkin Zelin

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 Abigail Epstein
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. Erik Alexander Barfod Levinsohn

The Lidz Prize in Psychiatry  Awarded to a graduating student for an outstanding thesis in the field of psychiatry or neuroscience. Melody Yin Hu

The M.D./Ph.D. Prize  Awarded to the graduating M.D./Ph.D. students with the most outstanding dissertation. Max Christian Petersen, Andrew Thomas Timberlake

Dr. Marvin Moser Prize  Established in 2007 by Dr. Marvin Moser for a prize-winning thesis in preventive cardiology, lipid disorders, or hypertension. David William Goldstein

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 medical school, who merits such award by virtue of the excellence of the thesis that the student has written as required for the medical degree. Hannah Zornow Alter

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. Karri Weisenthal

David and Harriet Seligson Thesis Prize  Established in 2011 in honor of Dr. David Seligson, the founder of the Department of Laboratory Medicine, for an outstanding thesis in the area of laboratory medicine. Tina Xia

Surgery Prize  Awarded to the senior medical student entering a surgical field, who has done outstanding research during medical school. Nathaniel Thomas Ondeck

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, 1972–1974. Nicole Krenitsky

The Abraham White Prize  Awarded yearly to a Yale medical student for outstanding student research. Established in 2010, the prize is in memory of Dr. Abraham White, who served as a distinguished teacher and scholar of Physiological Chemistry at Yale from 1931 to 1948. Ronnye Rutledge

STUDENT RESEARCH DAY ORAL PRESENTATIONS, MAY 10, 2018

Charuta Gavankar Furey. Exome sequencing reveals novel causes of congenital hydrocephalus (Dr. Kristopher Kahle, Neurosurgery)

Katherine Abigail Epstein. Smoking cessation and outcome after ischemic stroke or TIA (Dr. Walter Kernan, Internal Medicine)

Valerie Louise Luks. In utero gene therapy: Targeted nanoparticles for correction of cystic fibrosis (Dr. David Stitelman, Surgery)
Hannah Zornow Alter. *Photography and addiction medicine as activism during the 1960s amphetamine crisis* (Dr. Naomi Rogers, History of Medicine)

Max Christian Petersen. *Insulin receptor Thr1160 phosphorylation mediates lipid-induced hepatic insulin resistance* (Dr. Gerald Shulman, Cellular and Molecular Physiology)

Andrew Thomas Timberlake. *An epistatic explanation: Exome sequencing reveals novel causes of craniosynostosis* (Dr. Richard Lifton, Genetics)

**AWARDS TO FACULTY AND HOUSE STAFF, MAY 2018**

**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(s) of the medical sciences. Rachel Liu, M.B.B.Ch.

**Charles W. Bohmfalk Prizes** Established in 1989 under the terms of the Alice Bohmfalk 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 Sciences: Akiko Iwasaki, Ph.D. Clinical Sciences: Jeremy Moeller, M.D., M.Sc.

**The Alvan R. Feinstein Award** Presented to a Yale 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. Susan Forster, M.D.

**The Leah M. Lowenstein Award** Presented annually by the Office for Women in Medicine to faculty members who are models of a medical educator whose humane teaching reaches and influences all students regardless of gender, race, or socioeconomic background. These are the traits espoused by the late Leah Lowenstein, a medical educator and first female dean of a coeducational medical school. Karen Jubanyik, M.D.

**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 interaction with patients. Katherine McKenzie, M.D.

**The Betsy Winters House Staff Award** 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. Gabrielle Grisotti, M.D., and Sarah Perkins, M.D.
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 which places the highest priority on collegial relationships, mutual respect, and sensitivity among 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 our School is free from discrimination and acts of intolerance based on race, gender, sexual orientation, religion, national origin, ancestry, age, or physical handicap. 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.

See also http://studentlife.yale.edu/guidance-regarding-free-expression-students-yale.

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 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 Misconduct, Including Sexual Harassment and Sexual Assault

http://smr.yale.edu

The School of Medicine and Yale University have established procedures and resources to prevent and address sexual misconduct, including sexual harassment and sexual assault. In this bulletin, the section on Resources on Sexual Misconduct in the chapter Yale University Resources and Services provides extensive information and guidance. Faculty, medical students, and postdoctoral fellows may opt to bring an informal or a formal complaint to the University-Wide Committee on Sexual Misconduct or to the Title IX Coordinator of the School of Medicine. The School of Medicine sponsors regular programming to reduce the harm of campus sexual misconduct. During orientation in the first year and again in the second year before starting clinical rotations, students have mandatory training sessions in preventing and responding to sexual harassment and assault. Also, in the courses (pre-clerkship), the Office of Education sends first- and second-year students a harassment survey to fill out twice a year. In the clerkships, electives, and subinternships, a harassment survey is sent twice a year to third-year students and once a year to fourth-year students. The final clerkship and elective course evaluations have four questions under the learning environment section that inquire about sexual harassment, sexual assault, mistreatment, and abuse.

Racial and Ethnic Harassment

The Office of Diversity, Inclusion, Community Engagement, and Equity, headed by Darin Latimore, M.D. (darin.latimore@yale.edu), chief diversity officer and deputy dean for diversity and inclusion, will work in conjunction with Valarie Stanley, director of the Office for Equal Opportunity Programs, 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 that individual’s own situation, is encouraged to contact the Office for Equal Opportunity Programs (www.yale.edu/equalopportunity). Students who believe that they have been harassed on the basis of race, religion, or ethnic origin by any member of the Yale community can file a complaint with one of the University’s human relations counselors, who will investigate the complaint. If a resolution has not been achieved and the student wishes to pursue the complaint further, the student may request the President’s Committee on Racial and Ethnic Harassment to consider the matter.

Peer Advocate Program

The Peer Advocate program was established in 2000 by the associate dean for student affairs and several medical students. It provides students with nonthreatening peer listeners who are available at any time of day or night to discuss strategies, offer reality checks, and brainstorm solutions to challenging personal, academic, or professional situations, and to point students in the direction of appropriate resources. The Peer Advocates are
medical students chosen by their classmates during the first year of medical school for being approachable, trustworthy, mature, thoughtful, and discerning—qualities that should allow them to be good listeners and trusted confidants. The nomination process does not permit campaigning. Peer Advocates serve their fellow students for the duration of medical school.

**Dean’s Procedure for Student Complaints**

This procedure governs any case in which a student has a complaint, including but not limited to a complaint of discrimination on the basis of race, sex, color, religion, age, disability, protected veteran status, national or ethnic origin, sexual orientation, or gender identity or expression, against a member of the faculty or administration of the complainant’s School. For additional information, see http://equalopportunity.yale.edu/deans-procedure-student-complaints.

**Provost’s Procedure for Student Complaints**

This procedure governs any case in which a student has a complaint, including but not limited to a complaint of discrimination on the basis of race, sex, color, religion, age, disability, protected veteran status, national or ethnic origin, sexual orientation, or gender identity or expression, against a faculty member who is not a member of the faculty of the complainant’s School (or, in the case of students in Yale College and the Graduate School, not a member of the Faculty of Arts and Sciences); or against an employee who is not an administrator in the student’s School or who is not subject to discipline by the student’s dean. Also 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. For additional information, see http://equalopportunity.yale.edu/provosts-procedure-student-complaints.

**President’s Procedure for Addressing Students’ Complaints of Racial or Ethnic Harassment**

This procedure is available to any students who believe that they have been harassed on account of race or ethnic origin by any member of the Yale community. For purposes of this procedure, racial or ethnic harassment will be considered to occur when any individual is subjected to arbitrary, capricious, or discriminatory treatment on the basis of race or ethnic origin. For additional information, see http://equalopportunity.yale.edu/presidents-procedure-addressing-students-complaints-racial-or-ethnic-harassment.

**CURRICULUM MANAGEMENT:**

**EDUCATION COMMITTEE STRUCTURE**

**Curriculum Management and Integration**

The Educational Policy and Curriculum Committee (EPCC) and the School of Medicine’s basic science and clinical departments share responsibility for the quality and excellence of our educational program.
The EPCC provides centralized oversight of the curriculum and is responsible for ensuring that it is integrated, coordinated, and designed to achieve the School's overall educational objectives.

The departments, through their faculty, provide the expertise needed to inform the content of specific components in the curriculum (design) and to teach it to the students (implementation).

Both the EPCC and the departments have a role in reviewing, assessing, and modifying the curriculum. The EPCC, through its review committee structure, comprehensively reviews each component of the curriculum and the curriculum as a whole on a regular basis in order to inform, monitor, update, and improve the curriculum. Departments, through their education leaders and teaching faculty, review data about the quality and effectiveness of their curricular and teaching efforts and make adjustments as needed to improve teaching and ensure consistency with the overall goals and guiding principles of the curriculum.

Educational Policy and Curriculum Committee

The education committee structure is designed to (1) integrate, coordinate, and align deliberations and decisions regarding educational policy, guidelines, and procedures with the ongoing implementation, review, and evolution of the curriculum; (2) ensure that there is broad-based faculty representation; and (3) make certain that the committee has full and final decision-making authority.

The EPCC has thirty-one members and is responsible for centralized oversight of the School's educational policies and curriculum, and for ensuring that the educational program is integrated, coordinated, and designed to achieve the School's overarching goals. To achieve this, the EPCC will:

• Provide careful and thorough oversight of the curriculum review process, including the curriculum as a whole as well as its various components
• Promote the development of new ideas and consider recommendations for curricular changes made by its review committees as well as suggestions from students, faculty, and departments
• Review and monitor the School's educational policies to ensure that they are effectively implemented, adhered to, and up to date
• Regularly review and monitor LCME accreditation standards and implement changes as needed to ensure that the educational program is in full compliance with all standards and elements

DECISION-MAKING PROCESS

The deliberations and decisions of the EPCC will be guided by the principles and values embodied in the YSM educational mission statement as well as the Yale system of education. A quorum of ten members must participate, either in person, by phone, or through electronic means including e-mail, in order for decisions to be made. Decisions will be based on a simple majority vote (one more than half of the members voting). In the event of a tie vote, the chair of the committee has the deciding vote.
COMMITTEE MEMBERSHIP

Appointed Members (18)¹
Associate Dean for Curriculum, Chair
Associate Dean for Student Affairs
Associate Dean for Educational Scholarship/Director, Teaching and Learning Center (TLC)
Associate Dean for Graduate Medical Education
Deputy Dean and Chief Diversity Officer
Associate Director for Curriculum and Educator Assessment, TLC
Associate Director for Student Assessment, TLC
Codirectors of Integrated Course Curriculum²
Director of Clerkships
Director of Electives
Director, Clinical Skills Program
Director, M.D./Ph.D. Program
Academic Adviser (rotating)
Curriculum Support Librarian
Chair, Progress Committee
Alumni representative
Deputy Dean for Education, ex officio

Elected Faculty Members (7)²
Integrated Course Director
Clerkship Director
Elective Director
At-large Faculty (4, elected by the YSM Faculty Advisory Committee)

Students (6)
Elected students³ (5: 1 representative from each year)
Medical Student Council President

¹ Appointed members are selected based on their role in medical education, with no term limit.
² Integrated course, clerkship, and elective directors are nominated by department chairs; directors of medical studies (DMS); fellow integrated course, clerkship, and elective directors; and central curriculum directors. Election of nominated candidates is done by vote of the integrated course, clerkship, or elective directors in the candidate’s curricular area. The at-large positions are chosen by the Faculty Advisory Committee using their selection process. Elected faculty positions have a four-year term with reelection permitted.
³ Students are selected by the student body using their election process. These are one-year terms with reelection permitted.

CURRICULUM REVIEW COMMITTEES

The three Curriculum Review Committees work collaboratively with departments, faculty, and students to review and improve individual integrated courses, clerkships, and electives. This includes gathering information, reviewing and analyzing data, and making recommendations that promote:
• 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
• congruence of integrated course, clerkship, and elective objectives with the overarching goals of the curriculum
• use of the most effective teaching methods to achieve the learning objectives
• effective use of formative and summative assessment methods

The Curriculum Review Committees, through their directors, report the results of curricular reviews to the EPCC on a regular basis. Recommendations of the Curriculum Review Committees for changes in the content or teaching methodology within an integrated course, clerkship, or elective based on these reviews can be directly implemented by the integrated course, clerkship, or elective director. However, changes that have broader impact across the curriculum must be brought to the EPCC for consideration and implementation.

Integrated Course Review Committee
The Integrated Course Review Committee is charged with assessing each course in the curriculum at least once every three years and more frequently when deemed necessary by the committee. The reviews provide the integrated course leaders with an evaluation of their course based on student feedback; analysis of course material and instructional sessions; alignment of assessment questions with learning objectives; and comparison of course goals with Yale's overarching curriculum goals, and with national standards. The committee also examines integration of course content with other courses within the curriculum and ensures that we are meeting LCME standards for accreditation.

The integrated course review is a constructive process to help stimulate discussion between courses of intended and unintended content overlap and any omissions in content areas that may not be apparent when viewing courses in isolation. The process will also identify methods of curriculum delivery that are particularly effective and will provide information on these practices to other courses.

The committee is cochaired by the codirectors of courses and administered by the manager of courses. There are seven appointed members: one basic science faculty, four course directors, one clinical faculty, and one ad-hoc faculty; and four to eight elected students (one or two per class). Other members are one medical school librarian and one representative from the Teaching and Learning Center. The committee meets once a month.

Clerkship Review Committee
The Clerkship Review Committee is charged with assessing each clerkship in the curriculum at least once every four years. The goals of the committee are threefold: (1) to ensure educational quality, innovation, and a supportive learning environment in each of the core clerkships; (2) to provide the clerkship director information regarding themes of student feedback and the integration of clerkship content with other components of the curriculum; and (3) to ensure compliance with LCME educational directives for accreditation.

The clerkship review is a constructive process that aims to stimulate productive discussion among clerkship directors, faculty, staff, students, and leadership in order to
support the highest quality educational experience. The review covers multiple aspects of the clerkship: organization, clinical and didactic teaching, patient care, the learning environment, and the clerkship director’s analysis and outlook. The process also identifies methods of curriculum delivery that are particularly effective, which can then be provided to other clerkship directors for continuous clerkship improvement.

The committee is chaired by the director of clerkships and administered by the manager of clerkships. There are five appointed members: two clinical faculty, one basic science faculty, one curriculum support librarian, and one clerkship administrator/coordinator; and six to ten elected students (one or two per class; must include at least one M.D./Ph.D. student). Other members are one clerkship director/associate director; one representative from the Teaching and Learning Center, one Physician Associate Program faculty; and one medical curriculum administrator. The committee meets once a month or more frequently as needed.

**Elective Review Committee**

The Elective Review Committee is charged with assessing each elective in the curriculum at least once every four years. The goals of the committee are threefold: (1) to ensure educational quality, innovation, and a supportive learning environment in each of the core electives; (2) to provide the elective director information regarding themes of student feedback and the integration of elective content with other components of the curriculum; and (3) to ensure compliance with LCME standards for accreditation.

The elective review is a constructive process that aims to stimulate productive discussion among elective directors, faculty, staff, students, and leadership in order to support the highest quality educational experience. The review covers multiple aspects of the elective: organization, clinical and didactic teaching, patient care, the learning environment, and the elective director’s analysis and outlook. The process also identifies methods of curriculum delivery that are particularly effective, which can then be provided to other elective directors for continuous elective improvement.

The committee is chaired by the director of electives and administered by the manager of electives. There are eight appointed members: three elective directors, two clinical faculty, and three elective coordinators; and four to eight elected students (one or two per class). Other members are the registrar, one representative from the Teaching and Learning Center, and one medical curriculum administrator. The committee meets at least once a month or more frequently as needed.

**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 ensure 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.

The committee is chaired by the director of student research and includes approximately eighteen faculty from both basic science and clinical departments as well as the section of the history of medicine. There are no term limits. Changes in membership of the committee are made by the chair in consultation with the other members of the committee.

The committee meets at least once a year and may meet more often as needed.

**Progress Committee**

The Progress Committee reviews the academic performance of each student to determine suitability for continued advancement in the curriculum and for graduation. This review includes decisions about graduation, promotion, leaves of absence, special study, remediation, academic probation, suspension, and dismissal. The Progress Committee uses a single and uniform standard for the promotion and graduation of students.

The Progress Committee is chaired by a senior faculty member and includes approximately twelve faculty from both basic science and clinical departments. The associate dean for student affairs, senior registrar, and registrar are *ex officio* (non-voting) members. Faculty serving on the committee are familiar with the curriculum and graduation requirements and have demonstrated a deep interest in the well-being of the students. There are no term limits. Recommendations for changes in membership of the committee are made by the chair in consultation with the deputy dean for education and other members of the Progress Committee. Those recommendations are submitted to the dean, who has final authority for committee membership.

The Progress Committee meets approximately monthly. When a question arises which cannot wait for the next full meeting of the Progress Committee, the chair may call an emergency meeting, convene a subcommittee, or poll the members of the Progress Committee for their opinions by phone or e-mail.

**REVIEW OF STUDENTS**

Each student’s academic progress is reviewed annually, or more frequently as needed, as specified in the Yale School of Medicine Satisfactory Academic Progress Policy. In addition, the Progress Committee considers other relevant information in order to determine if the student is developing the professional attributes needed to become a safe and effective physician, including moral and ethical character, professional behavior, good judgment, sense of responsibility, sensitivity and compassion for individual needs, and emotional stability. In making its decisions, the committee takes into account the academic record of the student, including but not limited to information such as qualifier performance, standardized skills assessments, course commentaries, clerkship evaluations, performance on board exams, as well as letters and reports regarding incidents of unprofessional behavior, personal testimony and special circumstances.

**COMMITTEE DECISIONS AND NOTIFICATION**

In reviewing the academic progress of students, the Progress Committee makes one of the following determinations:
• Meeting the requirements for satisfactory academic progress
• Not meeting the requirements for satisfactory academic progress, whereby actions may include one of the following:
  Remediation
  Academic Probation
  Suspension
  Dismissal

Students who are making satisfactory progress will not hear directly from the Progress Committee.

If the Progress Committee determines that a student has not demonstrated satisfactory progress or performance in any aspect of the medical school curriculum, remediation will be required. This remediation is designed to provide the student with a structure to address any deficits with the goal of helping the student improve performance to a satisfactory level. When remediation is required, the student will be notified in writing, including the specifics of the required remediation and the consequences of not successfully completing the remediation according to a specified timeline.

If there is a pattern of poor performance or serious violation of the School’s code of conduct or professionalism standards, the student may be placed on academic probation concurrent with the remediation, or suspended. The student will be notified in writing of the terms of the academic probation or suspension, including the requirements for having the academic probation or suspension removed as well as the consequences of not meeting these requirements according to a specified timeline.

A student who is unable to meet the academic requirements of the School despite remediation efforts may be dismissed. Additionally, a student who at any time behaves in a manner that is considered incompatible with the ideals of a physician may be dismissed. If dismissal occurs, the student will be notified in writing of the decision.

A summary of the actions taken by the Progress Committee may appear in the student’s MSPE, and the student will be notified of this in writing.

**APPEAL PROCESS**

A student may appeal the decision of the Progress Committee. The appeal process includes two steps:

**Step 1** To begin the appeal process, the student must notify the chair of the Progress Committee in writing of the intention to appeal within seven (7) days from the date the student receives notification of the Progress Committee’s decision. The student has the right to appear before the committee, and for support may bring an adviser who is a member of the School of Medicine community. The student may not bring legal representation. The committee will consider any additional information brought to its attention by the student in reaching a final decision.

**Step 2** Final decisions of the Progress Committee may be appealed to the dean of the School of Medicine. A student wishing to take this step in the appeal process must submit to the dean (or the dean’s designate) a written request describing the basis of the appeal within seven (7) days from the date the student receives notification of the Progress Committee’s final decision. Appeals may be based on a claim that some pertinent evidence was
not taken into account or that the Progress Committee’s consideration was unfair, and must describe the basis for such a claim.

The dean (or the dean’s designate) will review the appeal and may or may not invite the student to meet. The dean (or the dean’s designate) may either issue a final decision, or may remand the case back to the Progress Committee for reconsideration. The dean (or the dean’s designate) shall communicate this decision in writing to the student and to the Progress Committee. The dean’s decision is final.

ADVISING AT YALE SCHOOL OF MEDICINE

Every Yale School of Medicine student is randomly assigned a faculty academic adviser. The six advisers are highly regarded faculty members who have demonstrated dedication to and interest in students and their undergraduate medical education. Twenty percent of each adviser’s effort is supported by the dean for this role. The advisers meet periodically with their advisees one-on-one and in groups to offer advice on navigating the journey through medical school and beyond and to help students having academic difficulties or questions. They are responsible for writing their advisees’ MSPEs and other letters of support. Students may “opt out” of having their MSPE written by the assigned academic adviser, in which case it will be written by the associate dean for curriculum. 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 a meeting throughout medical school. 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.

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 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 extensions have been granted. The student 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 the registrar was notified of the leave. 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 the intention to return at least eight weeks prior to the end of the approved leave. In addition, a returning student who wishes to be considered for financial aid 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.

**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 require a student to take a leave for medical reasons when, on recommendation of the director of Yale Health or the chief of the Mental Health and Counseling department, the associate dean for student affairs determines that the student is a danger to self or others because of a serious medical problem, or that the student has refused to cooperate with efforts deemed necessary by Yale Health to determine if the student is such a danger. An appeal of such a leave must
be made in writing to the dean of the School of Medicine no later than seven days from
the date of withdrawal.

A student who is placed on medical leave during any term will have 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 respon-
sibilities. 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 asso-
ciate 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. Stu-
dents living in University housing units are encouraged to review their housing contract
and the related polices of the Yale 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 oral notice of such service to the associate
dean for student affairs. In providing the advance notice the student does not need
to indicate an intent 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 the 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 the 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 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 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.

INFORMATION SECURITY, POLICY, AND COMPLIANCE

Before graduation, students in the Yale School of Medicine must remove from their personally owned devices (including laptops, smartphones, and portable storage devices) all electronic Protected Health Information (ePHI). In order to ensure compliance with this important policy, students must complete an online survey and attestation regarding their disposition of ePHI that they may have used in their time at Yale. Completed surveys are sent to the Information Security, Policy, and Compliance (ISPC) Office for collection. Students who have not completed this requirement by the set deadline will have their diplomas withheld and will not be able to receive their M.D.

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, the Physician Associate program, and other graduate and professional schools at Yale.
Residents of Harkness Hall live in a secure building with single-occupancy bedrooms. 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. For additional information visit http://housing.yale.edu.

**Dining**

Café Med, located in Harkness Hall at the School of Medicine, is open from 7:30 a.m. to 7 p.m., Monday through Friday. The menu enhances convenience and choice, with a customizable salad, soup, and rice bar utilizing local and seasonal ingredients; specialty coffees and fresh pastries; a grab-and-go selection of freshly made salads, sandwiches, and entrées; and a daily hot food option. For additional information visit http://hospitality.yale.edu/retail/cafe-med.

**DISABILITY INSURANCE**

Yale 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 Security maintains a presence throughout the Medical Center area and across the Yale campus on a 24/7 basis, both through uniformed security officers and centrally monitored electronic security systems that include video cameras, card readers, intercoms, emergency blue telephones, and intrusion alarm systems.

The Yale Security Department partners with the Yale Police Department by patrolling parking facilities, pedestrian areas, and buildings using marked vehicles, bicycles, and foot patrols. Security officers are also available to assist with lockouts, perform walking escorts, and provide safe rides.

The University Security Department can be reached twenty-four hours a day, seven days a week, by calling 203.785.5555. For additional information regarding public safety at Yale, or to request additional security services for special events, please visit our website at http://publicsafety.yale.edu.

**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. website, 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 http://medicine.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. See also http://medicine.yale.edu/ombuds.
Office of Diversity, Inclusion, Community Engagement, and Equity

The Office of Diversity, Inclusion, Community Engagement, and Equity (DICE) strives to create an inclusive community for the diverse student body of Yale School of Medicine (YSM) by supporting and celebrating our differences. Though outreach, education, and advocacy DICE aims to promote the creation of the interdisciplinary health care workforce — including innovative physicians, researchers, and scientists — who reflect and serve the diversity of the community. DICE provides outreach to strengthen the pipeline of diverse individuals for health care and biomedical careers, identifying and recruiting talented individuals from diverse backgrounds. It works directly with medical student groups such as the Asian Pacific American Medical Association; the Committee on Diversity, Inclusion, and Social Justice; Outpatient; the Student National Medical Association/Latino Medical Student Association; Women in Medicine; and Yale First Generation/Low Income. And it supports a number of health and science pipeline programs, including the Youth Science Enrichment Program, the Health Professions Recruitment Exposure Program, Yale Summer Enrichment Medical Academy, and the Minority Association of Pre-Med Students Mentorship Program. Supporting and celebrating informative discourse about diversity and inclusion, DICE actively seeks and is responsive to student and trainee feedback; hosts a monthly social for underrepresented medical and Ph.D. BBS students; sponsors a mentorship program for underrepresented students and trainees; and maintains relationships with house staff and faculty organizations that work toward inclusion. DICE partners with locals schools and organizations to host community events and supports ongoing community service projects throughout the year, advocating on behalf of vulnerable populations in New Haven. And it supports student advocacy for social justice within and beyond the campus community, partnering with Yale and local organizations to provide informative and actionable dialogue on key issues of social justice. Deputy Dean and Chief Diversity Officer Darin Latimore, M.D., heads the office. Contact persons are program coordinators Linda V. Jackson and Yashika Williams. The office is located at 367 Cedar Street, Suite 320, New Haven CT 06511; telephone, 203.785.7545. For additional information please visit http://medicine.yale.edu/dice.

Computing at the School of Medicine

Computing assistance is available 24/7 for Yale students, faculty, and staff by contacting the ITS Help Desk (203.432.9000, or helpdesk@yale.edu). Assistance is also available at the Sterling Hall of Medicine Walk-in Computer Support Center (WCS-SHM), Monday through Friday from 9 a.m. to 4:30 p.m., located on the lower level of the Medical Library.

For information on the extensive computer facilities in the Medical Library, see the chapter Harvey Cushing/John Hay Whitney 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. 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 computers and a laser printer.

Yale Information Technology Services (ITS) has made special arrangement with vendors to provide discounted prices to Yale students, staff, and faculty. Information is available at http://its.yale.edu/software-technology/buying-guide. 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 Walk-in Computer Support Center.

School of Medicine ID Card Policy

School of Medicine ID cards are issued when a student registers for the first year during orientation. These ID cards open all perimeter doors to the School of Medicine, as well as some interior connector doors. They should be worn visibly at all times while in the Medical Center and presented, upon request, to University officials whose assigned responsibilities authorize them to seek proper identification.

To obtain a replacement ID card, you must go in person to the medical school ID Center. When an ID card is lost, stolen, or no longer functions, the ID Center issues a replacement card with the photograph on record. Malfunctioning ID cards that are returned to the ID Center are replaced at no charge. Lost, stolen, or deliberately damaged cards are replaced at a fee of $20.

Yale New Haven Health Identification Badges

The Yale New Haven Health photo ID badge is issued when a medical student registers for the first year during orientation. This ID badge allows entry to common, basic access points in the hospital. While on some clerkships, additional ID access is allowed depending on the student’s service assignment. For students enrolled for more than four years, such as students taking extended study or M.D./Ph.D. students, badges will be activated for a longer period.

The badge includes the student’s name, photo, and designation as a medical student at Yale. The first ID badge is free; the replacement cost is $10. Worn out or defective badges are replaced free of charge.
A GLOBAL UNIVERSITY

Yale continues to evolve as a global university, educating leaders and advancing the frontiers of knowledge across the entire world. The University's engagement beyond the United States dates from its earliest years. Yale has drawn students from abroad for nearly two centuries, and international topics have been represented in its curriculum for the past hundred years and more.

This year, Yale welcomed the largest number of international students and scholars in its history. The current enrollment of more than 2,800 international students from 121 countries comprises 22 percent of the student body. Yale is committed to attracting the best and brightest from around the world by offering generous international financial aid packages, conducting programs that introduce and acclimate international students to Yale, and fostering a vibrant campus community. The number of international scholars (visiting faculty, researchers, and postdoctoral fellows) has also grown to nearly 2,700 each year.

Yale's globalization is guided by the vice president for global strategy and deputy provost for international affairs, who is responsible for ensuring that Yale's broader global initiatives serve its academic goals and priorities, and for enhancing Yale's international presence as a leader in liberal arts education and as a world-class research institution. The vice president and deputy provost works closely with academic colleagues in all of the University's schools and provides support and strategic guidance to the many international programs and activities undertaken by Yale faculty, students, and staff.

The Whitney and Betty MacMillan Center for International and Area Studies (http://macmillan.yale.edu) is the University's focal point for teaching and research on international affairs, societies, and cultures.

The Jackson Institute for Global Affairs (http://jackson.yale.edu) seeks to institutionalize the teaching of global affairs throughout the University and to inspire and prepare Yale students for global citizenship and leadership.

The Office of International Affairs (http://world.yale.edu/oia) provides administrative support for the international activities of all schools, departments, 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.

The Office of International Students and Scholars (http://oiss.yale.edu) hosts orientation programs and social activities for the University's international community and is a resource for international students and scholars on immigration matters and other aspects of acclimating to life at Yale.

The Yale World Fellows Program (http://worldfellows.yale.edu) 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.

The Association of Yale Alumni (http://aya.yale.edu) provides a channel for communication between the alumni and the University and supports alumni organizations and programs around the world.
Additional information may be found on the “Yale and the World” website (http://world.yale.edu), including resources for those conducting international activities abroad and links to international initiatives across the University.

CULTURAL AND SOCIAL RESOURCES

There are many ways to keep up-to-date about campus news and events. These include the YaleNews website, which features stories, videos, and slide-shows about Yale people and programs (http://news.yale.edu); the interactive Yale Calendar of Events (http://calendar.yale.edu); and the University’s social media channels on Facebook, Twitter, Instagram, Tumblr, LinkedIn, and YouTube.

The Yale Peabody Museum of Natural History, founded in 1866, houses more than thirteen million specimens and objects in ten curatorial divisions: anthropology, botany, entomology, historical scientific instruments, invertebrate paleontology, invertebrate zoology, mineralogy and meteoritics, paleobotany, vertebrate paleontology, and vertebrate zoology. The renowned collections provide crucial keys to the history of Earth and its life-forms, and in some cases are the only remaining traces of animals, plants, and cultures that have disappeared. About 5,000 objects are on public display, including the original “type” specimens—first of its kind—of *Brontosaurus*, *Stegosaurus*, and *Triceratops*.

The Yale University Art Gallery is the oldest college art museum in the United States, having been founded in 1832 when the patriot-artist John Trumbull gave more than one hundred of his paintings to Yale College. Since then its collections have grown to more than 250,000 objects ranging in date from ancient times to the present. In addition to its world-renowned collections of American paintings and decorative arts, the gallery is noted for outstanding collections of Greek and Roman art, including artifacts from the ancient Roman city of Dura-Europos; collections of early Italian paintings; the Société Anonyme Collection of twentieth-century European and American art; modern and contemporary art and design; Asian art; African art; art of the ancient Americas; and Indo-Pacific art. In December 2012 the gallery completed a comprehensive expansion and renovation project. The expanded museum unites all three buildings—the landmark Louis Kahn building (1953), the Old Yale Art Gallery (1928), and Street Hall (1866)—into a cohesive whole with a rooftop addition by Ennead Architects (2012). 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. For more information, please visit http://artgallery.yale.edu.

The Yale Center for British Art is a public art museum and research institute that houses the largest collection of British art outside the United Kingdom. Presented to the University by Paul Mellon (Yale College, Class of 1929), the collection reflects the development of British art and culture from the Elizabethan period onward. The center’s collections include more than 2,000 paintings, 250 sculptures, 20,000 drawings and watercolors, 6,000 photographs, 40,000 prints, and 35,000 rare books and manuscripts. More than 40,000 volumes supporting research in British art and related fields are available in the center’s reference library. In May 2016 the center reopened to the public following the completion of a multiyear project to conserve its iconic Louis I. Kahn building. For more information, please visit http://britishart.yale.edu.
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 five hundred musical events take place at the University during the academic year. In addition to recitals by graduate students and faculty artists, the School of Music presents the Yale Philharmonia, the Oneppo Chamber Music Series, the Ellington Jazz Series, the Horowitz Piano Series, New Music New Haven, Yale Opera, Yale Choral Artists, and concerts at the Yale Collection of Musical Instruments. The Yale Summer School of Music/Norfolk Chamber Music Festival presents the New Music Workshop and the Chamber Choir and Choral Conducting Workshop, in addition to the six-week Chamber Music Session. Many of these concerts stream live on the School’s website (http://music.yale.edu), the Norfolk website (http://norfolk.yale.edu), and the Collection of Musical Instruments website (http://collection.yale.edu). Additionally, the School presents the Iseman Broadcasts of the Metropolitan Opera Live in HD free to members of the Yale community. Undergraduate organizations include the Yale Bands, the Yale Glee Club, the Yale Symphony Orchestra, and numerous other singing and instrumental groups. The Department of Music sponsors the Yale Collegium, Yale Baroque Opera Project, 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, and many other special events.

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

The religious and spiritual resources of the University serve all students, faculty, and staff of all faiths. These resources are coordinated and/or supported through the Chaplaincy (located on the lower level of Bingham Hall on Old Campus); the University Church in Yale in Battell Chapel, an open and affirming ecumenical Christian congregation; and Yale Religious Ministries, the on-campus association of professionals representing numerous faith traditions. This association includes the Saint Thomas More Catholic Chapel and Center at Yale and the Joseph Slifka Center for Jewish Life at Yale, and it supports Buddhist, Hindu, and Muslim life professionals; several Protestant denominational and nondenominational ministries; and student religious groups such as the Baha’i Association, the Yale Hindu Student Council, the Muslim Student Association, the Sikh Student Association, and many others. Hours for the Chaplain’s Office during the academic term are Monday through Thursday from 8:30 a.m. to 11 p.m., Friday from 8:30 a.m. to 5 p.m., and Sunday evenings from 5 to 11. Additional information is available at http://chaplain.yale.edu.

ATHLETIC FACILITIES

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, modern, and ballroom, among others), martial arts, zumba, yoga, 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. Additional information is available online at http://sportsandrecreation.yale.edu.

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 programs, hours, and specific costs is available online at http://sportsandrecreation.yale.edu.

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, stand-up paddleboards, and kayaks. Adjacent to the lake, a shaded picnic grove and gazebo are available to visitors. In a more remote area of the facility, hiking trails loop the north end of the property; trail maps and directions are available on site at the field office. The OEC runs seven days a week from the third week of June through Labor Day. For more information, including mid-September weekend availability, call 203.432.2492 or visit http://sportsandrecreation.yale.edu.

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 http://sportsandrecreation.yale.edu.

HEALTH SERVICES

The Yale Health Center is located on campus at 55 Lock Street. 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 health, gynecology, mental health, pediatrics, pharmacy, laboratory, radiology, a seventeen-bed inpatient care unit, 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 https://yalehealth.yale.edu/coverage/student-coverage.

**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 Health, Gynecology, Student Wellness, 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, and students enrolled in the PA Online program (see below), 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 fee. 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.

**PA Online candidates** Students enrolled in the PA Online program are not eligible for Yale Health Basic Coverage but may enroll in Yale Health Student Affiliate Coverage. This plan includes services described in both Yale Health Basic and Yale Health Hospitalization/Specialty Coverage. Coverage is not automatic; enrollment applications are available directly from the PA Online program, and special enrollment deadlines apply (July 15 for full-year or fall-term coverage; January 15 for spring-term coverage only).

**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 by the University’s deadlines noted below.
YALE HEALTH HOSPITALIZATION/SPECIALTY COVERAGE

For a detailed explanation of this plan, which includes coverage for prescriptions, see the Yale Health Student Handbook, available online at https://yalehealth.yale.edu/coverage/student-coverage.

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 https://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 fees will not be prorated.

YALE HEALTH STUDENT DEPENDENT PLANS

A student may enroll the student’s lawfully married spouse or civil union partner and/or legally dependent child(ren) under the age of twenty-six in one of three student dependent plans: Student + Spouse, Student + Child/Children, or Student Family Plan. These plans include services described in both Yale Health Basic Coverage and Yale Health Hospitalization/Specialty Coverage. Coverage is not automatic, and enrollment is by application. Applications are available from the Member Services Department or can be downloaded from the website (https://yalehealth.yale.edu/resources/forms) 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, students enrolled in the EMBA program, 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. Applications are available from the Member Services Department or
can be downloaded from the website (https://yalehealth.yale.edu/resources/forms) and must be received by September 15 for full-year or fall-term coverage, or by January 31 for spring-term coverage only. For PA Online candidates, applications are available directly from the PA Online program, and special enrollment deadlines apply (July 15 for full-year or fall-term coverage; January 15 for spring-term coverage only).

Eligibility Changes

Withdrawal A student who withdraws from the University during the first fifteen days of the term will be refunded the fee paid for Yale Health Hospitalization/Specialty 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. Assistance with identifying and locating alternative sources of medical care may be available from the Care Management Department at Yale Health. 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. Fees will not be prorated or refunded. Students who withdraw are not eligible to enroll in Yale Health Student Affiliate Coverage. Regardless of enrollment in Yale Health Hospitalization/Specialty Coverage, students who withdraw will have access to services available under Yale Health Basic Coverage (including Student Health, Athletic Medicine, Mental Health & Counseling, and Care Management) during these thirty days to the extent necessary for a coordinated transition of care.

Leaves of absence Students who are granted a leave of absence are eligible to purchase Yale Health Student Affiliate Coverage for the term(s) of the leave. If the leave occurs on or before the first day of classes, Yale Health Hospitalization/Specialty Coverage will end retroactive to the start of the coverage period for the term. If the leave occurs anytime after the first day of classes, Yale Health Hospitalization/Specialty Coverage will end on the day the registrar is notified of the leave. In either case, students may enroll in Yale Health Student Affiliate Coverage. Students must enroll in Affiliate Coverage prior to the beginning of the term unless the registrar is notified after the first day of classes, in which case, the coverage must be purchased within thirty days of the date the registrar was notified. Fees 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 website (https://yalehealth.yale.edu/resources/forms). Fees 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. 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 website (https://yalehealth.yale.edu/resources/forms). 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**

Proof of vaccination is a pre-entrance requirement determined by the Connecticut State Department of Public Health. Students who are not compliant with this state regulation will not be permitted to register for classes or move into the dormitories for the fall term, 2018. Please access the Incoming Student Vaccination Record form for health professions students at https://yalehealth.yale.edu/resources/forms. Connecticut state regulation requires that this form be completed and signed, for each student, by a physician, nurse practitioner, or physician’s assistant. The form must be completed, independent of any and all health insurance elections or coverage chosen. Once the form has been completed, the information must be entered into the Yale Medicat online system (available mid-June), and all supporting documents must be uploaded to http://yale.medicatconnect.com. The final deadline is August 1.

**Measles, mumps, rubella, and varicella** All students who were born after January 1, 1957, are required to provide proof of immunization against measles (rubeola), mumps, German measles (rubella), and varicella. Connecticut state regulation requires two doses of measles vaccine, two doses of mumps vaccine, two doses of rubella vaccine, and two doses of varicella vaccine. The first dose must have been given on or after January 1, 1980, and after the student’s first birthday; the second dose must have been given at least thirty (30) days after the first dose. If dates of vaccination are not available, titer results (blood test) demonstrating immunity may be substituted for proof of vaccination. The cost for all vaccinations and/or titers rests with the student, as these vaccinations are considered to be a pre-entrance requirement by the Connecticut State Department of Public Health. Students who are not compliant with this state regulation will not be permitted to register for classes or move into the dormitories for the fall term, 2018.

**Quadrivalent meningitis** All students living in on-campus dormitory facilities must be vaccinated against meningitis. The only vaccines that will be accepted in satisfaction of the meningitis vaccination requirement are ACWY Vax, Menveo, Nimenrix, Menactra, Mencevax, and Menomune. The vaccine must have been received after January 1, 2014. Students who are not compliant with this state regulation will not be permitted to register for classes or move into the dormitories for the fall term, 2018. The cost for all vaccinations and/or titers rests with the student, as these vaccinations are considered to be a pre-entrance requirement by the Connecticut State Department of Public Health. Please note that the State of Connecticut does not require this vaccine for students who intend to reside off campus.

**TB screening** The University requires tuberculosis screening for all incoming health professions students. For students in the School of Medicine, this entails providing proof of a PPD done within six months of the start of the fall term, or Quantiferon testing or a chest X-ray for individuals known to have previously positive PPD results.
**Hepatitis B** In addition, all health professions students are required to provide documentation of three Hepatitis B vaccinations and the laboratory report from a Quantitative Hepatitis B Surface Ab titer. In the event that the titer result is determined to be negative, a second series of three vaccinations followed by a repeat titer is required.

**Tdap** In addition, all health professions students must show evidence that they have received a tetanus-diphtheria-pertussis booster within the past ten years.

Any students who will be traveling abroad should make an appointment for a travel health consultation at least six to eight weeks prior to departure. Travel health consultations are available through the Student Health Department at Yale Health, and through Passport Health. Additional information is available at https://yalehealth.yale.edu/more/travel-health-services-students. It is especially important that students notify the Travel clinician of travel activities that include working in areas where they might encounter blood or fluid exposure. Such students will be given a supply of antiretroviral medication at no charge. They will also receive instructions about how to handle possible exposure.

**OFFICE OF INTERNATIONAL STUDENTS AND SCHOLARS**

The Office of International Students and Scholars (OISS) coordinates services and support for Yale’s nearly 6,000 international students, faculty, staff, and their dependents. OISS staff assist with issues related to employment, immigration, and personal and cultural adjustment, as well as serve as a source of general information about living at Yale and in New Haven. As Yale University’s representative for immigration concerns, OISS helps students, faculty, and staff obtain and maintain legal nonimmigrant status in the United States. All international students and scholars must register with OISS as soon as they arrive at Yale; see http://oiss.yale.edu/coming.

OISS programs, like the Community Friends hosting program, daily English conversation groups, U.S. culture workshops and discussions, bus trips, and social events, provide an opportunity to meet members of Yale’s international community and become acquainted with the many resources of Yale University and New Haven. Spouses and partners of Yale students and scholars will want to get involved with the International Spouses and Partners at Yale (ISPY), which organizes a variety of programs.

The OISS website (http://oiss.yale.edu) provides useful information to students and scholars prior to and upon arrival in New Haven, as well as throughout their stay at Yale. International students, scholars, and their families and partners can connect with OISS and the Yale international community virtually through Facebook.

OISS is housed in the International Center for Yale Students and Scholars, which serves as 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—located at 421 Temple Street, across the street from Helen Hadley Hall—also provides meeting space for student groups and a venue for events organized by both student groups and University departments. For more information about reserving space at the center, go to http://oiss.yale.edu/about/the-international-center/international-center-room-reservations. For information about the center, visit http://oiss.yale.edu/about/international-center.
RESOURCES ON SEXUAL MISCONDUCT

Yale University is committed to maintaining and strengthening an educational, working, and living environment founded on civility and mutual respect. Sexual misconduct is antithetical to the standards and ideals of our community, and it is a violation of Yale policy and the disciplinary regulations of Yale College and the graduate and professional schools.

Sexual misconduct incorporates a range of behaviors including sexual assault, sexual harassment, intimate partner violence, stalking, voyeurism, and any other conduct of a sexual nature that is nonconsensual, or has the purpose or effect of threatening, intimidating, or coercing a person. Violations of Yale’s Policy on Teacher-Student Consensual Relations also constitute sexual misconduct. Sexual activity requires consent, which is defined as positive, unambiguous, and voluntary agreement to engage in specific sexual activity throughout a sexual encounter.

Yale aims to eradicate sexual misconduct through education, training, clear policies, and serious consequences for violations of these policies. In addition to being subject to University disciplinary action, many forms of sexual misconduct are prohibited by Connecticut and federal law and may lead to civil liability or criminal prosecution. Yale provides a range of services, resources, and mechanisms for victims of sexual misconduct. The options for undergraduate, graduate, and professional school students are described at https://smr.yale.edu.
SHARE: Information, Advocacy, and Support

55 Lock Street, Lower Level
Office hours: 9 a.m.—5 p.m., M–F
24/7 hotline: 203.432.2000
https://sharecenter.yale.edu

SHARE, the Sexual Harassment and Assault Response and Education Center, has trained counselors available 24/7, including holidays. SHARE is available to members of the Yale community who wish to discuss any experience of sexual misconduct involving themselves or someone they care about. SHARE services are confidential and can be anonymous if desired. SHARE can provide professional help with medical and health issues (including accompanying students to the hospital or the police), as well as ongoing counseling and support. SHARE works closely with the University-Wide Committee on Sexual Misconduct, the Title IX coordinators, the Yale Police Department, and other campus resources and can provide assistance with initiating a formal or informal complaint.

If you wish to make use of SHARE’s services, you can call the SHARE number (203.432.2000) at any time for a phone consultation or to set up an in-person appointment. You may also drop in on weekdays during regular business hours. Some legal and medical options are time-sensitive, so if you have experienced an assault, we encourage you to call SHARE and/or the Yale Police as soon as possible. Counselors can talk with you over the telephone or meet you in person at Acute Care in the Yale Health Center or at the Yale New Haven Emergency Room. If it is not an acute situation and you would like to contact the SHARE staff during regular business hours, you can contact Carole Goldberg, the director of SHARE (203.432.0310, carole.goldberg@yale.edu), Jennifer Czincz, assistant director (203.432.2610, jennifer.czincz@yale.edu), Sherine Powerful (203.436.8217, sherine.powerful@yale.edu), or John Criscuolo (203.494.6247, john.criscuolo@yale.edu).

Title IX Coordinators

203.432.6854
Office hours: 9 a.m.—5 p.m., M–F
https://provost.yale.edu/title-ix

Title IX of the Education Amendments of 1972 protects people from sex discrimination in educational programs and activities at institutions that receive federal financial assistance. Sex discrimination includes sexual harassment, sexual assault, and other forms of sexual misconduct. The University is committed to providing an environment free from discrimination on the basis of sex.

Yale College, the Graduate School of Arts and Sciences, and the professional schools have each designated a deputy Title IX coordinator, reporting to Stephanie Spangler, Deputy Provost for Health Affairs and Academic Integrity and the University Title IX Coordinator. Coordinators respond to and address specific complaints, provide information on and coordinate with the available resources, track and monitor incidents to identify patterns or systemic issues, deliver prevention and educational programming, and address issues relating to gender-based discrimination and sexual misconduct within Yale University.
their respective schools. Coordinators are knowledgeable about, and will provide information on, all options for complaint resolution, and can initiate institutional action when necessary. Discussions with a Title IX coordinator are confidential. In the case of imminent threat to an individual or the community, the coordinator may need to consult with other administrators or take action in the interest of safety. The coordinators also work closely with the SHARE Center, the University-Wide Committee on Sexual Misconduct, and the Yale Police Department.

**University-Wide Committee on Sexual Misconduct**

203.432.4449  
Office hours: 9 a.m.–5 p.m., M–F  
https://uwc.yale.edu

The University-Wide Committee on Sexual Misconduct (UWC) is an internal disciplinary board for complaints of sexual misconduct available to students, faculty, and staff across the University, as described in the committee’s procedures. The UWC provides an accessible, representative, and trained body to fairly and expeditiously address formal complaints of sexual misconduct. UWC members can answer inquiries about procedures and the University definition of sexual misconduct. The UWC is comprised of faculty, administrative, and student representatives from across the University. In UWC cases, investigations are conducted by professional, independent fact finders.

**Yale Police Department**

101 Ashmun Street  
24/7 hotline: 203.432.4400  
https://your.yale.edu/community/public-safety/police/sensitive-crimes-support

The Yale Police Department (YPD) operates 24/7 and is comprised of highly trained, professional officers. The YPD can provide information on available victims’ assistance services and also has the capacity to perform full criminal investigations. If you wish to speak with Sergeant Marnie Robbins Hoffman, the Sensitive Crimes & Support coordinator, she can be reached at 203.432.9547 during business hours or via e-mail at marnie.robbins@yale.edu. Informational sessions are available with the Sensitive Crimes & Support coordinator to discuss safety planning, available options, etc. The YPD works closely with the New Haven State’s Attorney, the SHARE Center, the University’s Title IX coordinators, and various other departments within the University. Talking to the YPD does not commit you to submitting evidence or pressing charges; with few exceptions, all decisions about how to proceed are up to you.
Departments and Sections

This section provides information for all departments and some sections in the School of Medicine.

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. Additional information on clinical elective and subinternship experiences is available at https://medicine.yale.edu/education/curriculum/advancedtraining/clinicalelectives.

Faculty listings reflect approved appointments effective April 30, 2018.
School of Medicine 2018–2019

Anesthesiology

TMP 3, 203.785.2802
http://medicine.yale.edu/anesthesiology


Associate Professors  S. Akhtar, A.A. Alian, M.M. Burg (Medicine), J. Charchafflieh, S. Garwood, V. Kurup, L.L. Maerz (Surgery), G.F. McCloskey, A.D. Oprea, W.M. Popescu, R. Schonberger, J.J. Schwartz, J. Sherman


Research Scientists  N. Rajeevan, F.G. Sayward


Associate Clinical Professor  S.B. Stone


Lecturers  C.A. Baer, J. Bates, V.N. Garla, B. Kaplan, S. LaCoursiere, P. Nadkarni, G. Sendlewski, Y. Solad
ANES 104, Anesthesiology Advanced Clinical Elective  Individualized full-time program of instruction in anesthesia subspecialties, including cardiovascular, neurosurgical, obstetrical, and pediatric anesthesia. One or two students every four weeks. Director: S. Akhtar

ANES 141, Anesthesiology Laboratory Research Elective  Students interested in laboratory research projects focused in the neurophysiology and neuropharmacology of the sensations of pain and itch, and in vascular biology, are encouraged to speak with department faculty. Development of individual research projects is encouraged as well; contact D.G. Silverman. Students who are interested in complementary approaches to pain management, such as acupuncture, should contact S.-M. Wang. One student every four weeks; additional time recommended. Director: D.G. Silverman

ANES 142, Anesthesiology Clinical Research Elective  Students are welcome to inquire about participating in ongoing research by the department faculty involving clinical responses to drugs affecting cardiopulmonary, central nervous, and autonomic nervous system; noninvasive cardiovascular monitoring; perioperative coagulation; and other topics. Development of individual research projects is encouraged as well; contact D.G. Silverman. Students who are interested in complementary approaches to pain management, such as acupuncture, should contact S.-M. Wang. Those interested in neurophysiology should consult with R.H. LaMotte or C. Ma. Those interested in topics in vascular and stem cell biology should contact L.E. Niklason. One or two students every four weeks. Director: L.E. Niklason
CELL BIOLOGY

SHM C207, 203.737.5603
http://cellbiology.yale.edu

Professors  C.G. Burd, M.J. Caplan (Cellular & Molecular Physiology), L. Cooley (Genetics), P. Cresswell (Immunobiology), P. De Camilli, J.E. Galán (Microbial Pathogenesis), F. Gorelick, C. Hashimoto (Emeritus), J.D. Jamieson, D.S. Krause (Laboratory Medicine), T.L. Lentz (Emeritus), H. Lin, V.T. Marchesi (Pathology), M.H. Nathanson, K. Neugebauer (Molecular Biophysics & Biochemistry), K.M. Reinisch, J.E. Rothman (Chair), M.A. Schwartz (Medicine), S.L. Wolin (Emeritus)

Associate Professors  J. Bewersdorf, J.S. Bogan (Medicine), D.A. Calderwood (Pharmacology), D. Colón-Ramos, S.M. Ferguson, V. Greco (Genetics), M. King, C.P. Lusk, T. Melia, C. Schlieker (Molecular Biophysics & Biochemistry), D.K. Toomre, Y. Zhang

Assistant Professors  D. Baddeley (Adjunct), J. Berro (Molecular Biophysics & Biochemistry), S. Guo, C. Lin, M. Mariappan, X. Su, P.A. Takizawa, S. Wang (Genetics)

Research Scientists  A. Ernst, S.S. Krishnakumar, X.N. Liu, C. Qiu


CBIO 501a and 502b, 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 include structure and organization of cells; regulation of the cell cycle and mitosis; protein biosynthesis and membrane targeting; cell motility and the cytoskeleton; signal transduction; cell adhesion; cell and tissue organization of organ 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. P.A. Takizawa

CBIO 600a and 601b, Frontiers in Medicine  A full-year graduate credit course for first-year M.D./Ph.D. students and an elective course for M.D. students, emphasizing the connections between basic and clinical science, human physiology, and disease. It parallels the content of Yale School of Medicine’s first-year courses and is designed for students who are considering a career in medical research or who choose to explore scientific topics in depth, learn about cutting-edge research, and improve their presentation skills. Discussions cover the challenges faced in research, selecting a topic, and pursuing an academic career. Select topics are presented by eminent faculty who serve as excellent role models for students’ academic careers. In most sessions, two students review relevant manuscripts under the guidance of a faculty mentor and present the material to the group. Prior to the start of class, students are required to submit questions concerning
techniques and concepts that may not be clear from the assigned papers. These questions are then addressed during the presentation. Student evaluations are graded on attendance, participation in group discussions, and formal presentations. The organizational meeting/introduction is August 23 at 4:30 pm (most sessions are in Hope 203 at YSM). Enrollment limited to students who have taken or are currently taking CBIO 501a and CBIO 502b. F. Gorelick, J.S. Bogan, K. Finberg, G. Lister


**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 602 lecture schedule. Thus, concurrent enrollment in CBIO 602 is required. M. King, D.A. Calderwood, M.J. Caplan, P. De Camilli, V. Horsley, T. Melia, T.D. Pollard, J.E. Rothman, P.A. Takizawa, J. Van Wolfswinkel

**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. A. Vignery

**CBIO 606b, Advanced Topics 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. S.M. Ferguson, C.G. Burd

**CBIO 611b, Vascular Cell Biology**  This course introduces the structure and organ-level physiology of the vascular system, then covers in greater depth the development, regulation, mechanics, and pathology of blood vessels. The major focus is on cellular and molecular mechanisms. The course includes both lectures and reading and discussion of recent literature. M.A. Schwartz

**CBIO 655a/GENE 655a, Stem Cells: Biology and Application**  This course is designed for first-year or second-year students to learn the fundamentals of stem cell biology and to gain familiarity with current research in the field. The course is presented in a lecture and discussion format based on primary literature. Topics include stem cell concepts, methodologies for stem cell research, embryonic stem cells, adult stem cells, cloning and
stem cell reprogramming, and clinical applications of stem cell research. Prerequisites: undergraduate-level cell biology, molecular biology, and genetics. I.-H. Park

[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 super-resolution “nanoscopes.”

CBIO 900a/GENE 900a/MCDB 900a, *First-Year Introduction to Research—Grant Writing and Scientific Communication* Grant writing, scientific communication, and laboratory rotation talks for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

CBIO 901b/GENE 901b/MCDB 901b, *First-Year Introduction to Research—Ethics: Scientific Integrity in Biomedical Research* Ethics and laboratory rotation talks for Molecular Cell Biology, Genetics, and Development track students. J. Bewersdorf

CBIO 903a or b, *Reading Course in Cell Biology* Independent study of specific topics in cell biology through directed reading of the literature under faculty supervision. Student may choose any topic and any Yale faculty subject to approval by the Cell Biology DGS. Open to Cell Biology students, and to students in other departments with approval from their respective DGS. Term paper required. K.M. Reinisch

CBIO 911a/GENE 911a/MCDB 911a, *First Laboratory Rotation* First laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

CBIO 912b/GENE 912b/MCDB 912b, *Second Laboratory Rotation* Second laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

CBIO 913b/GENE 913b/MCDB 913b, *Third Laboratory Rotation* Third laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley
**Cellular and Molecular Physiology**

SHM B147, 203.785.4041  
http://medicine.yale.edu/physiology


**Associate Professors**  N.A. Addy (Psychiatry), N. Bamford (Pediatrics), I.E. De Araujo (Psychiatry), J.B. Demb (Ophthalmology & Visual Science), T. Eid (Laboratory Medicine), S. Ishibe (Medicine), R.G. Kibbey (Medicine), J.J. Rinehart, S.K. Singh, A. Tufro (Pediatrics), X. Yang (Comparative Medicine)

**Assistant Professors**  S. Bragiantsev, J.J. Chung, G. de Lartigue, E. Gracheva, K.T. Kahle (Neurosurgery), E. Karatekin, C. Thoreen

**Senior Research Scientists**  E.L. Boulpaep, D.P. Zecevic


**C&MP 550a/ENAS 550a/MCDB 550a/PHAR 550a, 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. Graduate students evaluate research findings through literature review and weekly meetings with the instructor. W.M. Saltzman, S. Campbell
C&MP 560b/ENAS 570b/MCDB 560b/PHAR 560b, 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. F.J. Sigworth

C&MP 570b/NBIO 570b, Sensory Physiology  The 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 600a and 601b, 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. N. Carrasco and staff

C&MP 610a and 611b, Medical Research Scholars Program: Mentored Clinical Experience  The goals of the 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. E.L. Herzog
[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.

C&MP 630a/PATH 680a/PHAR 502a, Seminar in Molecular Medicine, Pharmacology, and Physiology] Readings and discussion on a diverse range of current topics in molecular medicine, pharmacology, and physiology. The class emphasizes analysis of primary research literature and development of presentation and writing skills. Contemporary articles are assigned on a related topic every week, and a student leads discussions with input from faculty who are experts in the topic area. The overall goal is to cover a specific topic of medical relevance (e.g., cancer, neurodegeneration) from the perspective of three primary disciplines (i.e., physiology: normal function; pathology: abnormal function; and pharmacology: intervention). D. Nguyen

C&MP 650b/PATH 660b/PHAR 580b, The Responsible Conduct of Research] Organized to foster discussion, the course is taught by faculty in the Pharmacology, Pathology, and Physiology departments and two or three senior graduate students. Each session is based on case studies from primary literature, reviews, and two texts: Francis Macrina’s Scientific Integrity and Kathy Barker’s At the Bench. Each week, students are required to submit a reaction paper discussing the reading assignment. Students take turns leading the class discussion; a final short paper on a hot topic in bioethics is required. B.E. Ehrlich, S.K. Singh

C&MP 710b/MB&B 710b, Electron Cryo-Microscopy for Protein Structure Determination] Understanding cellular function requires structural and biochemical studies at an ever-increasing level of complexity. The course is an introduction to the concepts and applications of high-resolution electron cryo-microscopy. This rapidly emerging new technique is the only method that allows biological macromolecules to be studied at all levels of resolution from cellular organization to near atomic detail. Counts as 0.5 credit. E.J. Sigworth, C.V. Sindelar
CHILD STUDY CENTER

NIHB 208, 203.785.2540
http://medicine.yale.edu/childstudy


Associate Professors M. Bloch, L.E. Fiellin (Medicine), D.M. Gordon (Psychiatry), M. Hampson (Radiology & Biomedical Imaging), T.J. McMahon (Psychiatry), J.C. McPartland, I. Park (Genetics), C. Pittenger (Psychiatry), F. Shic (Adjunct), M. Smith, D. Stubbe, D. Sukhodolosky


Instructors S. Baddam, M. Garland, C. Moreno, R. Muhle, C.S. Pierart

Senior Research Scientist G.M. Anderson

Research Scientists M. Finn-Stevenson, T. Liu, S.L. Macari, Z. Pringle, C. Reyes


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 Hospital, 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 302/Psych 320, Child Study Center Clinical Research Elective  This elective entails etiology, clinical manifestations, and treatment of adolescent psychopathology, including eating disorders, depression, suicide, psychosis, delinquency, and the impact of physical and mental disabilities on adolescent development. Reading is supplemented with live and taped clinical material. One student every four weeks. Director: R.M. Rohrbaugh

CHLD 325/Psych 325, Child Study Center Psychiatry Elective  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. Students are active team members of the Children's Psychiatric Inpatient Service (CPIS) and the consultation service to the pediatric wards of Yale New Haven Hospital and can take 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 practicals selected by the student following consultation with the director of medical studies and the Child Study Center. One student every four weeks. Director: R.M. Rohrbaugh
COMPARATIVE MEDICINE

BML 330, 203.785.2525
http://medicine.yale.edu/compmed

Professors  A.M. Bennett (Pharmacology), S. Diano (Obstetrics, Gynecology & Reproductive Sciences), V.D. Dixit, M. Hajos (Adjunct), J. Hirsch, T.L. Horvath (Chair), R.O. Jacoby (Emeritus), J.D. Macy, N. Sestan (Neuroscience), C.J. Zeiss

Associate Professors  C. Fernandez-Hernando, X. Gao, I. Levy, B. Lindenbach (Microbial Pathogenesis), M.S. Rodeheffer, P.C. Smith, Y. Suarez, X. Yang

Assistant Professors  J.L. Asher, C.J. Booth, M.O. Dietrich, J.A. Goodrich, S.R. Wilson

Research Scientists  S.A. Castner, S.R. Compton, J.M. McGrath (Genetics), T.P. Nottoli, G. Williams

DERMATOLOGY

LCI 501, 203.785.4092
http://medicine.yale.edu/dermatology


Associate Professors O.R. Colegio, S.E. Cowper, A. Galan, V. Greco (Genetics), B.A. King, A. Sethi, M.M. Tomayko

Assistant Professors C.G. Bunick, S.R. Christensen, B.G. Craiglow (Adjunct), S. Imaeda, L. Kole, J. Leventhal, P. Myung, S. Ramachandran, K. Suozzi, A. Zubek


Senior Research Scientists D.E. Brash (Therapeutic Radiology), R. Halaban, L.M. Milstone

Associate Research Scientists K.R. Blenman, D.J. Hanlon, K. Katsuno

Clinical Professor I. Dvoretzky

Associate Clinical Professor E.B. Milstone

DERM 120, Dermatology Outpatient Elective The goal of this course is to ground students in the fundamentals of dermatologic physical examination, diagnosis, and treatment. Students are expected to acquire the skills needed by a primary care physician or surgeon to evaluate dermatological problems independently. Through outpatient experiences at the West Haven VA Medical Center, the Adult and Pediatric Yale Primary Care Clinics, and possibly the Yale Health Center, students are exposed to a variety of primary and referral dermatology services that treat inflammatory and neoplastic skin diseases. Students are also exposed to dermatologic surgery and dermatopathology. Students participate in departmental Grand Rounds and educational conferences, and read and review assigned materials in preparation for a series of case discussions led by faculty. A formal presentation on a topic of the student’s choice is required in the final week. One or two students every four weeks. Director: S. Imaeda

DERM 302, Dermatology Inpatient Consult Elective Working as integral members of the dermatology consult team, comprised of a dermatology resident and attending physician, students are exposed to dermatologic disease requiring inpatient admission, systemic disease with cutaneous manifestations, and skin complications among hospitalized patients. Students learn about initial evaluation, workup, and differential diagnosis building; the role of biopsy and histologic evaluation; and treatment plan design. Under resident supervision, students evaluate a new consult patient each day and follow this patient for the course of the patient’s stay. Students are expected to read intensively on
relevant disease processes and formally present the patient to the attending on rounds. Additionally, students research disease and management-related questions that arise on the service and informally present a summary of findings to the attending and resident. Students participate in departmental Grand Rounds and educational conferences and in resident rounds of the inpatient service. Each student identifies a patient with a chronic dermatologic condition, conducts an in-depth interview to learn about how the disease and its treatment have affected the patient’s life, and how life considerations have affected disease management. At the end of the rotation, the student presents a formal case presentation and literature review at Grand Rounds. One student every four weeks. Prerequisite: DERM 120. Directors: M.M. Tomayko, S. Imaeda
SECTION OF EDUCATION

Office of Education: ESH 305, 203.737.4190
Office of Student Research: ESH 308, 203.785.6633
http://medicine.yale.edu/education/curriculum

Integrated Course Curriculum

MASTER COURSES

MD 1000, Introduction to the Profession  The first master course in the new curriculum is Introduction to the Profession, or iPro. This is a two-week course in which students have the opportunity to participate in an immersive hospital experience and introduction to New Haven as well as an introduction to bioethics and professional responsibility. Themes emphasized are teamwork and communication, the experience of illness for the patient, and medical decision-making and what goes into it. The premise of iPro is stories. Students reflect on the stories of the patients they meet and hear about, stories of the neighborhoods from which their patients come, the stories of the profession they are entering, and their own stories as they move forward in their professional journeys to become physicians. Open to M.D. and M.D./Ph.D. students only. N.R. Angoff

MD 1025, Scientific Foundations  This course integrates essential content from biochemistry, cell biology, epidemiology and public health, genetics, pathology, pharmacology, and physiology to provide first-year medical students with a foundation of knowledge in the basic sciences that underlies modern medicine. The course organizes content from the above disciplines into the following themes: Building a Body, Cell Communication, Cell Energy, Fluids and Gradients, Gene Expression, Life and Death of a Cell, and Population Health. Additional organ- and systems-related content for the above disciplines is distributed across the remaining pre-clerkship courses, as appropriate. Open to M.D. and M.D./Ph.D. students only. P.A. Takizawa

MD 1050, Genes and Development  This course begins with content in the areas of basic human genetics, genetics technology, embryology, and developmental genetics. This is followed by principles of neoplasia and cancer biology, considering neoplasia as a genetically based aberration of normal development and cellular regulation. The course concludes with the topics of clinical oncology and hematology. This content is integrated and sequenced for optimal learning utilizing a variety of teaching methods including lectures, demonstrations, team-based learning, small-group workshops, clinical-pathologic correlations, patient interviews, and labs. Open to M.D. and M.D./Ph.D. students only. A.E. Bale, M.P. DiGiovanna

MD 1075, Attacks and Defenses  This course includes content focused on the ability of the body to respond to injury, especially infectious and inflammatory injury. Themes include innate immunity, cellular immunology, infection and immunity, applied topics in immunopathology including autoimmune diseases such as seen in rheumatology and immunomodulation, infectious disease and antimicrobial therapeutics, and dermatology and musculoskeletal disorders, integrating content areas by interweaving immunology and infection to inform each section of the other’s concepts. Human anatomy is
introduced and aligned to the musculoskeletal content. There is also an introduction to radiology with specific topics relevant to the anatomy material. Multiple small workshops and laboratories focus on practical aspects of this material including microbiology laboratories; laboratories that focus on histologic aspects of injury and repair; and workshops on clinical approaches and management of common musculoskeletal, infectious, and dermatologic conditions. Open to M.D. and M.D./Ph.D. students only. Lectures may be audited with approval of the course directors. S.M. Campbell, R.J. Homer

**MD 1100, Connection to the World**  
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 functional regionalization in the brain and on the long fiber tracts related to clinical neuroscience. Laboratory sessions examine preparations of human brain to explore anatomical relationships. Lectures in neurophysiology cover neuronal function at the cellular level, with a strong emphasis on the mammalian nervous system. Clinical correlations focus on specific diseases and are presented by one or two faculty members representing both basic and clinical sciences. Throughout the course, lectures in neurology and sensory system clinical correlates are paired with presentations of structure-function relationships. Lectures on the biological basis of behavior are integrated with neurology and psychiatry. Topics in the biological basis of behavior and psychiatry include principles and neural mechanisms of learning and memory, neural systems involved in fear and anxiety, reward and drug addiction, stress, and neural systems attention. Patients diagnosed with specific diseases are interviewed by course faculty during clinical correlations and workshops. Teaching formats include lectures, labs, team-based learning, workshops and clinical correlations. Open to M.D., M.D./Ph.D., and Neuroscience Ph.D. students only. The course cannot be audited. C.A. Greer, D.S. Navaratnam

**MD 1125, Homeostasis**  
Homeostasis is one of the fundamental properties of any living organism. The heart, lungs, and kidneys work in concert to provide oxygen to and remove toxins from our cells, and do so continuously from our first breath to our last. This course integrates cardiology, pulmonary, and renal content. The course starts with the renal system prior to the summer break, supported by digital anatomy sessions. Cadaver dissections matched to the organ and systems content of the course begin in the fall. Physiology and pathophysiology of organ systems are integrated in workshops and are taught by both clinical and physiology faculty. The sessions are heavily case-based and aimed at preparing the students for their clinical rotations. Open to M.D. and M.D./Ph.D. students only. D.S. Geller, S. Hull, N. Thande

**MD 1150, Energy and Metabolism**  
This course integrates physiology, cell biology, pathology, and pathophysiology for the following content areas: metabolism, gastrointestinal, hepatic and pancreatic, endocrinology, and the liver. It includes topics in nutrition, epidemiology and public health, and history of medicine. Open to M.D. and M.D./Ph.D. students only. E.H. Holt, C.R. Kapadia
MD 1175, Across the Lifespan  The goal of this course is for medical students to acquire knowledge of normal and abnormal human development through all stages of life: conception, pregnancy and birth, child and adolescent growth and development, the reproductive years, and middle age and senescence. Material is taught in a variety of formats, including lectures, small-group workshops that discuss patient cases, and laboratories, and in a way that fosters the acquisition of clinical reasoning skills and prepares students to enter clerkships. Open to M.D. and M.D./Ph.D. students only. F. Galerneau, C. Kumar

LONGITUDINAL COURSES

MD 1200, Human Anatomy  This longitudinal course runs concurrently with the master courses of the School of Medicine curriculum. It begins in the second term of first year and is completed at the end of the first term of the second year. Human Anatomy is integrated with the radiology, embryology, and pathophysiology activities of the master courses. Students engage in lectures, conferences, and cadaver dissections. Extensive use is made of computer software and Web-based radiologic, anatomic, and clinical reasoning activities. Four students are assigned to each cadaver; students work collaboratively; interpersonal and group process skills are stressed. Open to M.D. and M.D./Ph.D. students only. W.B. Stewart and sta≠

MD 1225, Professional and Ethical Responsibility  This course runs longitudinally through the first year and features lectures, readings, and small-group case discussions. The course examines the various contexts (social, legal, financial, and organizational) in which the practice of medicine takes place, with a particular focus on principles and approaches to medical ethics. Specific ethical problems in the practice of medicine are addressed, both historical and current, and these issues are considered in the setting of individual patient encounters as well as on the societal level. In addition, practical and ethical aspects of the various components of the U.S. health care system are reviewed. Open to M.D. and M.D./Ph.D. students only. J.S. Hughes, L. Dugdale

MD 1250, Scientific Inquiry: Research Methods and Responsible Conduct of Research  (includes MD 501b) The goal of this course 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. Open to M.D. and M.D./Ph.D. students only. J.N. Forrest, faculty, and sta≠

MD 501b, Responsible Conduct of Research  (taught as part of MD 1250) The Office of Student Research and the M.D./Ph.D. Program have developed a compact ethics course that satisfies the NIH requirements for students supported on training grants, i.e., first- and fifth-year medical students, and M.D./Ph.D. students. Attendance is mandatory by those students. Topics covered include peer review; responsible authorship and publications; policies regarding human subjects; live vertebrate animal subjects in research and
safe laboratory practice; collaborative research including collaborations with industry; data acquisition and laboratory tools, management, sharing, and ownership; conflict of interest; mentor-mentee responsibilities and relationships; research misconduct and policies for handling misconduct; the scientist as a responsible member of society, contemporary ethical issues in biomedical research, and the environmental and social impacts of scientific research. Material is taught through lectures with group discussion and case studies. (Six 1.5-hour sessions.) J.N. Forrest S. Alfano, M.J. Caplan, L. Cohen, F. Gorelick, B. Kazmierczak, R.J. Levine, D. Lewin, J.D. Macy, M. Picciotto, D.G. Schatz, S.S. Spangler, M. Waxman

**MD 1300, Clinical Skills** This course spans the first eighteen months of school for all medical students. Students begin to develop and refine their clinical skills, the essential elements of “doctoring” that physicians use during patient encounters. In Clinical Skills (CS), students learn to communicate with patients, families, and other members of the care team; examine patients; develop clinical reasoning skills; and understand the important role of a student-doctor in a patient’s care. Multiple teaching modalities are utilized in CS, but the bulk of the experiences are designed to be hands-on, offering students the opportunity to develop clinical skills with direct faculty observation and feedback, frequently with the use of standardized patients. Throughout CS, emphasis is placed on taking a patient-centered approach to care. Students pass the course by attending all class sessions (attendance is mandatory) and performing a competent history and physical exam in a standardized assessment session at UConn. Course content is practiced and supplemented in the Interprofessional Longitudinal Clinical Experience (ILCE). Director: J. Talwalkar

**MD 1350, Interprofessional Longitudinal Clinical Experience** The Interprofessional Longitudinal Clinical Experience (ILCE) is designed to prepare first-year health professional students to function effectively in the clinical environment. This course groups students from Yale School of Medicine, Yale School of Nursing, and the Yale Physician Associate Program to work together at a clinical site alongside faculty mentors. Students work at their sites approximately once a week throughout the first year of school. The program goal is for students to learn with, from, and about other health care professional students early in their training. Students accomplish this by working together to develop their clinical skills, knowledge, and attitudes, in conjunction with each school’s individual plan of study. Open to M.D., M.D./Ph.D., PA, and YSN students. Attendance at ILCE sessions is mandatory. Director: K. Wilkins; Codirectors: B.J. Wu, L. Honan, D. Brisette

**MD 1355, Medical Coach Experience (MCE)** The MCE is a program for medical students which begins at the end of the ILCE course. Each MCE coach works with a group of four students approximately once a week from mid-April of Year 1 through mid-December of Year 2. The main purpose of the MCE is to prepare students to successfully complete the standardized history and physical examination assessment at the University of Connecticut and to provide students opportunities to develop the skills they will need on clerkships starting in January of second year. Through the MCE, students see patients with physician coaches and develop their identities as future physicians. Director: B. Wu
Integrated Clerkships

MD 2000 (IM)/MD 2025 (NEUR), Medical Approach to the Patient Clerkship
This twelve-week integrated clerkship includes internal medicine (eight weeks) and neurology (four weeks) clinical components. Throughout the clerkship, students participate in integrated experiences that address the themes related to hospital-based care such as management of acute disease, diagnostic skills, transitions of care, quality improvement, and organ systems. Directors: D.B. DiCapua, D.W. Dunne

MD 2050 (IM)/MD 2075 (Psych), Biopsychosocial Approach to the Patient Clerkship
This twelve-week integrated clerkship comprises a six-week rotation in primary care and a six-week rotation in psychiatry. During the six-week primary care component, students spend 5–6 half-days each week working in a practice for adult primary care (i.e., general internal medicine, family medicine, or combined medicine/pediatrics) and 2–3 half-days each week working in a practice for general pediatrics. The psychiatry component of the clerkship includes three weeks of inpatient psychiatry, three weeks of consultation-liaison or emergency psychiatry, and six half-day sessions in a longitudinal outpatient psychiatry or integrated primary care–psychiatry clinic. Primary care and psychiatry each have distinct classroom exercises. However, an integrated classroom curriculum brings students together each Thursday afternoon to explore the many topics that overlap primary care and psychiatry, including mood disorders, anxiety disorders, substance abuse, somatic symptom disorder, and pain. Directors: P. Ellis, K.M. Wilkins; Codirectors: A.M. Fenick, M. Goldenberg

MD 2100 (SURG)/MD 2125 (EMER), Surgical Approach to the Patient Clerkship
This twelve-week integrated clerkship includes surgery (six weeks, general; three weeks, specialties) and emergency medicine (three weeks) clinical components. Throughout the clerkship students participate in integrated experiences that address themes of the OR experience such as perioperative care, emergency/trauma management, procedures, medical error and patient safety, and anesthesiology. Students also participate in a twelve-week mentoring program during the clerkship. Directors: J. Bod, F. Liu; Codirectors: K. Pei, D. Stitelman

MD 2150 (OBGY)/MD 2175 (PEDS), Women and Children’s Health Clerkship
This twelve-week integrated clerkship includes clinical components in obstetrics and gynecology and pediatrics. Students participate in six weeks of OB/Gyn and six weeks of pediatrics, with a mix of inpatient and ambulatory clinical experiences in both specialties. Throughout the clerkship students participate in integrated experiences that cover themes such as health and development, preventive care, sexual health, families and communities, health promotion and disease prevention, and perinatal care. All students attend an evening session with the gynecologic teaching associates. Directors: D.C. Hersh, S.R. Pathy; Codirectors: V.B. Desai, C. Boeras

Fourth-Year Courses

MD 9999, Capstone Course
The capstone course is required of fourth-year students in the spring term beginning the week of the internship match. Conceived more than ten years ago as a capstone to four years of medical school training, the course provides a
review of some of the knowledge and skills needed for internship and beyond; discipline-specific bootcamps for hands-on pre-internship training; 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. Director: D.I. Rosenthal

**Elective Courses**

**MD 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 acanthias; (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.N. Forrest, B. Forbush, P. Aaronson, L.G. Cantley, and sta≠

**MD 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.N. Berg

**MD 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 of the first year. Consent of instructor required. Two weeks in summer to be announced. Sta≠

**MD 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. Sta≠
MD 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 YJBM 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. Faculty adviser: J.R. Bender

MD 210, Cushing/Whitney Medical Library Information Survival Skills  This two-week elective attempts to fill a void in the student’s educational experience related to medical informatics. It is designed to introduce the publication, dissemination, and knowledge cycle of medical information. Using a variety of instructional methods, students develop the skills to access, retrieve, evaluate, and manage information for research and clinical purposes. J. Spak, J. Glover

MD 503, Seminars in Pediatrics: Bedside to Bench  The purpose of these seminars is to begin to understand how interesting questions derived from patients can help us learn more about biologic and pathologic processes. We specifically engage the group in discussions related to diseases or medical problems that affect infants and children. Students select a topic and faculty preceptor, see a patient with that preceptor, lead a seminar, present the patient briefly to the group, and, most importantly, develop some questions that arise in the course of learning about the patients. C.W. Bogue, M. Brueckner, M.K. Khokha, J.D. Jamieson

MD 505, Family and Transgender Medicine Elective (Oneonta, New York)  This is a unique opportunity to experience the full spectrum of family practice in a small-town environment. In this elective students (1) learn how to approach the practice of family medicine in a small town with limited access to specialists and how to use available resources to provide high-quality care, (2) learn about care coordination with larger health care systems in this practice setting, (3) learn about the practice of medicine in a small community and how physicians are integrated into that community, and (4) develop a family systems-based approach to providing care. The preceptor is a Yale graduate who provides primary care for a diverse population in both the hospital and clinic setting. In addition to both inpatient and outpatient family medicine, the preceptor also has a large practice in transgender medicine for both youths and adults, providing a unique practice opportunity. One student every two or four weeks. Directors: P. Ellis, C. Wolf-Gould

MD 510, Teaching and Learning Center Medical Education Elective  The word “doctor” is derived from the Latin docere, which means “to teach.” Indeed, the role of physicians as care providers is deeply intertwined with their role as teachers—of patients, of students, and of peers. The goal of this rotation is to introduce medical students to their role as teachers and better prepare them for this role before they begin residency. It makes use of didactic lectures, observations, group exercises, and teaching activities to facilitate the
development of knowledge, skills, and attitudes necessary to help students develop their experience and identity as teachers as they transition from medical school into residency. The objectives are (1) to develop specific skills that will allow students to teach more effectively in the various clinical and classroom scenarios (work rounds, grand rounds, physical diagnosis rounds, operating room, morning report, noon conference) that they will experience during residency; (2) to observe and learn from role models in the field of medical education and describe the characteristics of effective teachers; (3) to describe the current state of medical education, with a focus on educational theory and evidence derived from the medical education literature; (4) to explore how students can integrate their roles as clinician and educator regardless of career goals; and (5) to develop the attitudes that place a strong emphasis on the value of medical education. Assessment is built into the elective through self-reflection and verbal and written feedback from peers and faculty. These include homework assignments or feedback in group exercises and teaching activities. Students are also asked to self-assess their previous knowledge of and exposure to each of the topics described in the course. All students complete a set of objective structured teaching encounters (OSTEs) at the end of the course, directly observed by faculty facilitators. Maximum of twelve students for two weeks. Directors: J. Hafler, S. Holt, S. Soares

MD 600, Family Medicine Elective (Middlesex Hospital) This elective exposes students to the wide variety of clinical situations encountered in a national model, community-based family medicine residency program. In offices in Middletown, Portland, and East Hampton, students see and examine patients, present their findings and differential diagnosis, develop a plan of investigation and management with their supervisor, and explain the plan to their patients. Students manage and document care using electronic health records. In Middlesex Hospital, students are members of the team on the family medicine inpatient service, which provides medical, pediatric, newborn, maternity, and consultative care. Formal teaching activities include both didactic and interactive sessions, daily bedside teaching rounds, several weekly conference series, and weekly three-hour hands-on seminars. All three offices are equipped with facilities for minor surgery, casting, colposcopy, spirometry, audiometry, complete vision screening, electrocardiograms, various cultures, and rapid, enzyme-based diagnostic tests. Patients are from all walks of life and all ages and seek medical care for a wide variety of acute and chronic conditions. The emphasis is on continuity in ambulatory, nursing home, and hospital care. One student every four weeks. Director: M. Cardona

MD 610, Palliative/Hospice Medicine Elective (Branford, Connecticut) This fifty-two-bed inpatient program at the nation’s first hospice provides intensive palliative care for patients with terminal illness. The medical, psychological, and spiritual needs of these patients and their families are met through the coordinated efforts of an interdisciplinary team (IDT) of physicians, nurses, social workers, pharmacists, clergy, art therapists, and volunteers. Students work one-one-one with an attending physician caring for patients approaching the end of life and their families. They participate fully in admissions, morning rounds, family conferences, and IDT conferences. This elective offers students an opportunity to acquire advanced knowledge and skills in the management of symptoms (pain, anxiety, insomnia, etc.), which will benefit them in their future care of all patients,
both those approaching the end of life as well as those who are acutely or chronically ill. It is the only elective in which symptom management receives a major focus. The goal of this elective is to learn to provide 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. A four-week rotation, which allows for optional time spent with allied services and/or home care, is recommended, although a two-week rotation is available. One or two students every two or four weeks. Director: J. Sacco

**MD 1275/MGT 657b, Creating Health Care and Life Science Ventures**  This course gives students a broad understanding of the major “new venture” opportunities in health care and medicine—health care delivery, health care IT and the digital health landscape, biotechnology, medical devices, and health care process redesign especially in the surgical space. In each of these areas, they learn the canonical path to commercialization including how to identify “unmet clinical needs” market opportunities; who is the customer; how to build interdisciplinary teams; regulatory hurdles to commercialization; and creation of a business strategy. The course is designed for a diverse student body including students from management, natural sciences, medicine, law, nursing, and health care management programs. The course comprises lectures, raw cases, guest speakers, and in-class projects with coaching from the venture investor community. This thirteen-week class is held at Yale School of Management, Evans Hall, and is open to all medical students. For questions, contact the instructors at christopher.loose@yale.edu or ayesha.khalid@yale.edu. Directors: C. Loose, A. Khalid

**MD 1300, Evolution and Medicine**  Flipped curriculum: the lectures are recorded and available online. Each week the assigned lectures and corresponding assigned readings should be viewed/read before coming to class. That assignment is tested with short-answer quizzes and reading responses, which must be submitted before class. Those who have not submitted those responses are not allowed to come to class. Class consists of discussion of the points in the lectures and readings that were found to be difficult and of recent research papers relevant to the topic at hand. The course writing assignment for medical students is to substantially improve the Wikipedia page on a topic of their choice in evolutionary medicine. Enrollment limited to fifteen. Required text: Stearns and Medzhitov, *Evolutionary Medicine* (2015). Director: S. Stearns

**MD 1325, Uncertainty in Medicine: Critical Thinking and Decision-Making**  The goal for this course is to recognize that while much of medical education is traditionally centered on accrual of information for rapid recall, the health care profession is riddled with uncertainty and incomplete information. Health care providers are faced with multidimensional and multidisciplinary problems whose solutions require a combination of rigor, creativity, and collaboration. While our current approach to medical education is only reinforced by emphasis on short-answer standardized tests as metrics of aptitude, this course aims to combat that emphasis and prepare students for the complexities of the medical field by focusing on critical thinking and problem-solving skills in a case-based collaborative environment. We use case-based exercises to analyze topics that have contemporary relevance to medicine, e.g., development of screening programs for cancer or reporting and reduction of medical error. These exercises utilize a collaborative
approach aimed at developing several distinct skills: defining the scope of a complex problem, reducing a problem into definable parts, examining each part from multiple angles, prioritizing the parts and their potential solutions, and committing to an action-able solution while acknowledging unaddressed complexities and unknowns. Open to all medical students. Enrollment limited to twenty. The class meets weekly at noon from mid-June to early August. Director: G. Lister

**MD 1350, Inflammation**  This course covers fundamentals of inflammation from a broad biological perspective. Both physiological and pathological aspects of inflammation are the focus of this course, which is primarily for preclerkship medical students. Director: R.M. Medzhitov

**MD 1375, Spanish for Health Care Professionals**  This hybrid course offered in the fall and spring terms by the Yale Center for Language Study meets two times a week: one time in a traditional classroom on campus (face-to-face) and another time online. All students are required to have a laptop, a headset, and access to high-speed Internet to participate in the online component. During the online meetings, students are expected to be in a quiet space where they will be able to participate in online oral discussions. The course site is located in Canvas, and the online meetings use the online conference tool Big Blue Button in Canvas. Open to second- through fifth-year medical students in the fall and to all medical students in the spring. Course fee of $140 is reimbursed to medical students upon successful completion of the course. For questions contact lsp@yale.edu. Director: YCLS Staff Affiliate

**MD 1400, French for Health Care Professionals**  This hybrid course offered in the fall and spring terms by the Yale Center for Language Study meets two times a week: one time in a traditional classroom on campus (face-to-face) and another time online. All students are required to have a laptop, a headset, and access to high-speed Internet to participate in the online component. During the online meetings, students are expected to be in a quiet space where they will be able to participate in online oral discussions. The course site is located in Canvas, and the online meetings use the online conference tool Big Blue Button in Canvas. Open to second- through fifth-year medical students in the fall and to all medical students in the spring (based on enough student interest). Course fee of $140 is reimbursed to medical students upon successful completion of the course. For questions contact lsp@yale.edu. Director: YCLS Staff Affiliate

**MD 3191 (2 weeks) 5272 (4 weeks), Primary Care and Community Health Advanced Clinical Elective at HAVEN (Longitudinal)**  This advanced clinical elective in primary care and community health provides the learner with an experience in primary care at a unique, underserved site: HAVEN, the Yale student-run free clinic, which serves predominantly Hispanic, adult, uninsured persons. This is an opportunity for students to gain clinical experience and help serve an underserved population in an urban medical site where students will also help teach and supervise students earlier in their training. Students choose eight or fifteen Saturdays to work during the year, flexibly scheduled with oversight by the student leadership at HAVEN. Saturday hours are typically 8 a.m.–2 p.m., beginning with morning meeting, followed by direct patient care, ending with afternoon case presentation and didactic presentation. This elective is offered to
senior students, who are expected to assume full responsibility for their patients, under the supervision of attending physicians. Director: B. Richards

**MD 4000, Clinical Longitudinal Elective, Tailored** The student participates as an active member of the designated inpatient and/or outpatient service, participating in appropriate clinical cases at YNHH and/or the VA. A completed proposal with specific specialty learning objectives must be submitted to the elective director. The student attends regularly scheduled specialty conferences (to be determined by the student and the clinic preceptor). Assignment may be made weekly, twice monthly, or monthly as determined by the student’s laboratory responsibilities and in association with the clinic preceptor. This is the equivalent of a two-week, full-time elective, pass/fail. The specific rotation dates are determined by the elective director. Open to Yale M.D./Ph.D. students only; students must have completed six months of clerkships. Director: T. Taddei

**MD 5271, Primary Care and Community Health Advanced Clinical Elective at Chinle, Arizona** This advanced clinical elective in primary care and community health provides the learner with an immersion experience in primary care at a unique, underserved site: Chinle Health Center. This month-long rotation supervised by Steve Williams, M.D., and colleagues provides an opportunity to work with Navajo on the reservation in rural, northeast Arizona. Students appreciate working with traditional native American healers in a remote, beautiful landscape, addressing health needs created by poverty and injustice, and learning about career opportunities with the Indian Health Service. This elective is offered to senior students, who are expected to assume full responsibility for their patients, under the supervision of expert attending physicians. Director: P. Ellis

**MD 5273, Primary Care and Community Health Advanced Elective at San Francisco** This advanced clinical elective in primary care and community health provides the learner with an immersion experience in primary care at a unique, underserved site: San Francisco Free Clinic. During this month-long rotation supervised by Yale medical school alumni Patricia and Richard Gibbs and colleagues, students assume significant autonomy in seeing diverse patients. Students with interest in Orthopaedics can sometimes accompany Dr. Richard Gibbs to provide orthopaedic care to members of the San Francisco Ballet. This elective is offered to senior students, who are expected to assume full responsibility for their patients, under the supervision of expert attending physicians. Director: P. Ellis

**MD 5274, Primary Care Wednesday Evening Clinic** This one-year weekly outpatient elective in the Primary Care Center provides experience in the longitudinal care of adults. Students are directly responsible for care of medical problems and preventive 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 attending physicians. 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 students who have completed at least half of their clerkships (M.D./Ph.D.) or all of their clerkships (M.D.). Students must have completed the MAP clerkship. Director: P. Oray-Schrom; staffed by rotating attending physicians
EMERGENCY MEDICINE

464 Congress Avenue, Suite 260, 203.785.4404
http://medicine.yale.edu/emergencymed

Professors  C. Baum (Pediatrics), S.L. Bernstein, M. Bogucki, C.A. Brandt, K. Cheung, D.C. Cone, D. Della-Giustina, G. D’Onofrio (Chair), J.D. Dziura, D.A. Fiellin (Medicine), S.M. Powsner (Psychiatry), K. Santucci (Pediatrics), A. Ulrich, F. Vaca


Senior Research Scientist  M.V. Pantalon

Associate Research Scientist  C.H. Lee

Associate Clinical Professors  M. Hommel (Pediatrics), S.A. Walsh (Pediatrics)

Assistant Clinical Professors  K.J. Burns, T. Moadel, C. Rambus, I. Schwartz


MD 2125 (EMER)/MD 2100 (SURG), Surgical Approach to the Patient Clerkship  This twelve-week integrated clerkship includes surgery (six weeks, general; three weeks, specialties) and emergency medicine (three weeks) clinical components. Throughout the clerkship students participate in integrated experiences that address themes of the OR experience such as perioperative care, emergency/trauma management, procedures, medical error and patient safety, and anesthesiology. Students also
participate in a twelve-week mentoring program during the clerkship. Directors: J. Bod, F. Liu; Codirectors: K. Pei, D. Stitelman

**EMER 105, Emergency Medicine Subinternship** At Yale New Haven Hospital, emergency medicine subinterns complete a four-week rotation comprised of clinical shifts and didactic activities. Students complete sixteen shifts of eight hours’ duration. Students are expected to function as interns, evaluating patients primarily, managing multiple patients simultaneously, and presenting directly to the senior resident and attending physician. Students see a broad case mix in the emergency department and are expected to generate coherent, problem-focused, differential diagnoses. They are involved in all aspects of patient care including updating patients and families, calling consultants, and performing procedures. They rotate with a variety of attendings and are exposed to faculty from the sections of education, ultrasound, critical care, global health, administration, and EMS. Didactic activities for subinterns include resident educational conference, ultrasound image review, and simulation. Prerequisites: Internal Medicine and General Surgery Clerkships. Maximum of eight students every four weeks. Director: J. Bod

**EMER 112, Emergency Medicine Point-of-Care Ultrasound Elective** A two- or four-week experience that introduces the student to the use of 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 pelvic, vascular, 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. This elective is dedicated solely to the experience and practice of point-of-care ultrasound in the ED. Students are assigned daily scanning shifts that do not carry any clinical responsibility but offer exposure to the clinical environment. It is not the same as the combined Emergency Medicine/Ultrasound Subinternship, in which the student is primarily assigned clinical shifts to demonstrate knowledge, proficiency, and workflow, and also receives exposure to ultrasound through a few scan shifts and image review sessions. Maximum of four students every two or four weeks. Director: R. Liu

**EMER 115, Medical Simulation Elective** During this two- or four-week elective at the Yale Center for Medical Simulation (YCMS), students gain an immersive experience participating in medical simulation for medical education within the Yale School of Medicine. Students participate as learners in high-fidelity medical simulation cases and procedural sessions on topics related to the students’ desired specialty/topic of interest. Students also participate in medical simulation as educators and facilitators by participating as actors in medical simulation cases for medical students and residents rotating through YCMS. Students have the opportunity to participate in all educational activities
within YCMS including simulation cases, debriefing sessions, procedural sessions, and in-situ simulations (simulations that take place in the clinical environment). Students also create and program a medical simulation case on their topic of interest under the mentorship of YCMS faculty, using evidence-based medicine resources. Students are given one-on-one instruction on how to program their case. Students can also participate in simulation-based journal clubs, a simulation debriefing course, and simulation-based medical student precept sessions. Maximum of four students every two or four weeks. Director: L.V. Evans

**EMER 155/PEDS 155, Pediatric Emergency Medicine Elective** Fourth-year students have the opportunity to evaluate and manage a broad range of acute medical and surgical complaints while honing their clinical skills under direct attending supervision, including thirty-six clinical hours per week in the pediatric emergency department. Education during clinical shifts is augmented by pediatric emergency medicine fellow education conferences and one-on-one teaching sessions with the elective director. Participation in teaching conferences and mock codes is required. One student every four weeks; two- and three-week rotations considered upon request. Prerequisites: pediatric rotation, EPIC inpatient training, and EPIC ED e-learning. Director: P.L. Aronson

**EMER 305, Combined Emergency Medicine/Ultrasound Subinternship** At Yale New Haven Hospital, combined emergency medicine/ultrasound subinterns complete a four-week rotation comprised of twelve clinical shifts, four scanning shifts dedicated to bedside ultrasound, and didactic activities. On clinical shifts, subinterns are expected to function as interns, evaluating patients primarily, managing multiple patients simultaneously, and presenting directly to the senior resident and attending physician. Students see a broad case mix in the emergency department and are expected to generate coherent, problem-focused, differential diagnoses. They are involved in all aspects of patient care including updating patients and families, calling consultants, and performing procedures. They rotate with a variety of attendings and are exposed to faculty from all sections of the emergency department, but they spend a majority of their shifts with ultrasound-trained faculty to maximize their ability to incorporate bedside ultrasound into clinical evaluation. Scanning shifts are dedicated to the skills of performing and interpreting bedside ultrasounds and are typically supervised by a senior resident or ultrasound fellow. Attention is paid to image acquisition, machine optimization, and image interpretation. Diagnostic pelvic, vascular, 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). This is an advanced elective. Applicants must have completed or plan to complete an Emergency Medicine rotation prior to starting this elective. One or two students every four weeks. Director: J. Bod
GENETICS

SHM I308, 203.785.2649
http://medicine.yale.edu/genetics

Professors A.E. Bale, S.J. Baserga (Molecular Biophysics & Biochemistry), W.R. Breg (Emeritus), M. Brueckner (Pediatrics), K.A. Choate (Dermatology), L. Cooley, D.C. DiMaio, P.G. Gallagher (Pediatrics), J.E. Gelernter (Psychiatry), A.J. Giraldez (Chair), P.M. Glazer (Therapeutic Radiology), J.R. Gruen (Pediatrics), M. Gunel (Neurosurgery), K.K. Hirschi (Medicine), A.L. Horwich, K.K. Kidd (Emeritus), R.P. Lifton (Adjunct), H. Lin (Cell Biology), M.J. Mahoney (Emeritus), S.M. Mane, A. Mani (Medicine), M.N. Nitabach (Cellular & Molecular Physiology), C.M. Radding (Emeritus), V. Reinke, J. Rothberg (Adjunct), M.R. Seashore (Emerita), N. Sestan (Neuroscience), S. Somlo (Medicine), J.B. Sweasy (Therapeutic Radiology), P.J. Tattersall (Laboratory Medicine), S.M. Weissman, T. Xu (Adjunct), H. Zhao (Public Health)


Senior Research Scientist K.K. Kidd

Research Scientists W.A. Fenton, A.M. Hudson, J. Knight, J.M. McGrath, A.J. Pakstis


GENE 555a/CB&B 555a/CPSC 553a, Machine Learning for Biology This course introduces biology as a systems and data science through open computational problems in biology, the types of high-throughput data that are being produced by modern biological technologies, and computational approaches that may be used to tackle such problems. We cover applications of machine-learning methods in the analysis of high-throughput biological data, especially focusing on genomic and proteomic data, including denoising data; nonlinear dimensionality reduction for visualization and progression analysis; unsupervised clustering; and information theoretic analysis of gene regulatory and signaling networks. Students' grades are based on programming assignments, a midterm, a paper presentation, and a final project. S. Krishnaswamy

GENE 625a/MB&B 625a/MCDB 625a, 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
[GENE 645b/BIS 645b/CB&B 647b, Statistical Methods in Human Genetics] Probability modeling and statistical methodology for the analysis of human genetics data are presented. Topics include population genetics, single locus and polygenic inheritance, linkage analysis, quantitative trait analysis, association analysis, haplotype analysis, population structure, whole genome genotyping platforms, copy number variation, pathway analysis, and genetic risk prediction models. Prerequisites: EPH 505a and BIS 505b, or equivalent; and permission of the instructor. Offered every other year.

GENE 655a/CBIO 655a, Stem Cells: Biology and Application This course is designed for first-year or second-year students to learn the fundamentals of stem cell biology and to gain familiarity with current research in the field. The course is presented in a lecture and discussion format based on primary literature. Topics include stem cell concepts, methodologies for stem cell research, embryonic stem cells, adult stem cells, cloning and stem cell reprogramming, and clinical applications of stem cell research. Prerequisites: undergraduate-level cell biology, molecular biology, and genetics. I.-H. Park

GENE 675a and 676b, Graduate Student Seminar: Critical Analysis and Presentation of Scientific Literature 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 of all second-year students in Genetics. Graded Satisfactory/Unsatisfactory. V. Greco

[GENE 703b, The Mouse in Biomedical Research] This course describes aspects of comparative genomics, construction of genetically altered mice, mouse phenotyping, and study design relevant to the use of mice in the study of human disease. Prerequisites: undergraduate-level knowledge of genetics and mammalian anatomy and physiology.

[GENE 734b/MB&B 734b/MBIO 734b, Molecular Biology of Animal Viruses] Lecture course with emphasis on mechanisms of viral replication, oncogenic transformation, and virus-host cell interactions.

GENE 743b/MB&B 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.W. Hochstrasser, W. Gilbert

GENE 760b, Genomic Methods for Genetic Analysis Introduction to the analysis and interpretation of genomic datasets. The focus is on next-generation sequencing (NGS) applications including RNA-seq, ChIP-seq, and exome and whole genome sequencing. By the end of the course, each student will be able to process and analyze large-scale NGS datasets and interpret the results. This course is intended only for graduate students who are interested in applying genomic approaches in their thesis research. At a minimum, students must have basic familiarity with working in a UNIX/Linux computing environment. Prior experience with shell scripting or a scripting language such as Perl, Python, or
Ruby is strongly recommended. Interested students must contact the instructor early in the fall term to discuss their prior experience and expectations for the course. Enrollment limited to twenty. Prerequisite: permission of the instructor. J. Noonan

**GENE 777b/MCDB 677b, Mechanisms of Development**  An advanced course on mechanisms of animal 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. Z. Sun

**GENE 840a and b, Medical Genetics Elective**  Students participate in the diagnosis and management of fetuses, children, and adults with genetic disorders or who are at risk for genetic disorders. Patients are assigned to students for counseling and diagnostic evaluation, and for presentation at conferences. A laboratory experience in one of our genetics laboratories (Cytogenetics, Biochemical, and Molecular) is arranged according to the interest of the student. Twenty hours per week. One or two students every two or four weeks. Director: M. Spencer-Manzon

**GENE 900a/CBIO 900a/MCDB 900a, First-Year Introduction to Research—Grant Writing and Scientific Communication**  Grant writing, scientific communication, and laboratory rotation talks for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

**GENE 901b/CBIO 901b/MCDB 901b, First-Year Introduction to Research—Ethics: Scientific Integrity in Biomedical Research**  Ethics and laboratory rotation talks for Molecular Cell Biology, Genetics, and Development track students. J. Bewersdorf

**GENE 911a/CBIO 911a/MCDB 911a, First Laboratory Rotation**  First laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

**GENE 912b/CBIO 912b/MCDB 912b, Second Laboratory Rotation**  Second laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

**GENE 913b/CBIO 913b/MCDB 913b, Third Laboratory Rotation**  Third laboratory rotation for Molecular Cell Biology, Genetics, and Development track students. V. Horsley

**GENE 921a or b, Reading Course in Genetics and Molecular Biology**  Directed reading with faculty. Term paper required. Prerequisite: permission of Genetics DGS.
GLOBAL HEALTH

Office of International Medical Student Education: ESH 214, 203.785.5937
http://medicine.yale.edu/globalhealth

GH 700/EPH 591, Global Health Foundations  Global Health Foundations is a term-long, weekly elective intended for students in the health professions to develop an understanding of key aspects of global health research and practice. The objective is for students to attain a good understanding of key issues upon which they may base future research, service, and clinical pursuits in the field of global health. As the course involves students and faculty from all of the health professions, its participatory and collaborative nature provides a rich environment for interdisciplinary dialogue. Required of students in the Global Health Concentration at YSPH and YSN, and of students in the Certificate in Global Medicine program at YSM. Faculty advisers: G. Friedland, T. Rabin, S. Shenoi (YSM); P. Ryan-Krause (YSN); M. Skonieczny (YSPH); R. Gonzalez-Colaso (PA)

GH 701, Topics in Global Medicine  Topics in Global Medicine is a student-led, case-based seminar that provides participants with a broad knowledge base in current globally important health issues. Each session focuses on a specific health concern and aims to integrate issues concerning epidemiology and prevention along with diagnosis and treatment in a case-based format and clinically relevant fashion. The specifics of medical management are not the priority for this course. Importantly, the course provides a forum for interactive discussions of the health issues that pose unique challenges in resource-limited settings. Most sessions are collaborative—a faculty instructor is paired with one or two students, and the team works together to research and present the topic. Typically, each session includes a one-hour lecture by the presenting team followed by a half-hour interactive discussion facilitated by the student presenters. The discussion format is flexible and will be guided by the particular session topic. The content might focus on ethical concerns, interesting research questions, preventive strategies, etc. The course is designed for students in all of the health profession programs, specifically physician associate (PA), nursing (YSN), medicine (YSM), and public health (YSPH) students who have an interest in the clinical aspects of global health; it is open to all members of the Yale community. Active participation is expected, whether by way of presenting a topic, leading a discussion session, or participating in the discussion. Upon completion of this course, students are able to (1) appreciate the spectrum of clinical diseases, both communicable and noncommunicable, affecting persons in low- and middle-income countries (LMIC); (2) identify the major principles and challenges of providing medical care in LMIC; (3) broadly outline methods of diagnosis, prevention, and treatment for diseases encountered in resource-limited settings; (4) appreciate the importance of public health interventions in dealing with these diseases; and (5) have the opportunity to collaborate with a faculty member on the presentation of a topic of interest. Participation in this class is highly encouraged for students and residents interested in applying for an international rotation. May be offered in 2018–2019

EMD 566b/HPM 566b, Critical Issues in Global Health  The course focuses on critical challenges to the health of the poor in low- and middle-income countries and pays
particular attention to how these health gaps can be addressed in low-cost and highly effective ways. The course covers the architecture, politics, and governance of global health; key trends in approaches to meeting the health needs of the poor in low- and middle-income countries; and how science and technology can be harnessed for this purpose. It examines the burden of disease and the determinants of this burden; covers the leading causes of illnesses, disability, and preventable death from communicable and noncommunicable diseases, with special attention to women and children; and focuses particular attention on key health systems issues and recent efforts to overcome them, especially in low-income settings. Required of students in the Global Health Concentration at YSPH and YSN. K. Khoshnood (YSPH)
HISTORY OF MEDICINE

SHM L132, 203.785.4338
http://medicine.yale.edu/histmed

Professors  N. Rogers, J.H. Warner

Assistant Professors  H.M. Cowles (Adjunct), J. Radin, J.L. Schwartz (Public Health)

Yale College and Graduate School courses open to medical students:

HSHM 202a/AMST 247a/FILM 244a/HIST 147a/HLTH 170a, Media and Medicine in Modern America  Relationships between medicine, health, and the media in the United States from 1870 to the present. 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 207b/AMST 236b/EVST 318b/HIST 199b, American Energy History  The history of energy in the United States from early hydropower and coal to present-day hydraulic fracturing, deepwater oil, wind, and solar. Topics include energy transitions and technological change; energy and democracy; environmental justice and public health; corporate power and monopoly control; electricity and popular culture; labor struggles; the global quest for oil; changing national energy policies; the climate crisis. P. Sabin

HSHM 234b/HIST 471b, Medicine and Health in Society  The history of Western medical knowledge and practice from antiquity to the present. Focusing on the role of medicine in daily life, this course considers patients and practitioners, various approaches to healing, as well as changing understandings of health, disease, and the body across time and place. R. Elder

HSHM 241a/AFAM 170a/HIST 479a, Sickness and Health in African American History  A history of American medicine through the African American experience covering the period of slavery through #BlackLivesMatter. Oriented around the complex dynamics of medical abuse and medical resistance, key themes include medicine and slavery; gender and reproduction; medical experimentation and ethics; the rise of racial science; lynching and vigilante violence; segregation and public health; African-descended approaches to health and healing; the rise of the African American medical profession; and black health activism from slavery to #BlackLivesMatter. C. Roberts

HSHM 406a/HIST 150Ja, Healthcare for the Urban Poor  Exploration of the institutions, movements, and policies that have attempted to provide health care for the urban poor in America from the late nineteenth century to the present, with emphasis on the ideas (about health, cities, neighborhoods, poverty, race, gender, difference, etc) that shaped them. Topics include hospitals, health centers, public health programs, the medical civil rights movement, the women’s health movement, and national health care policies such as Medicare and Medicaid. S. Abedin
HSHM 415b/HIST 179Jb, Historical Perspectives on Science and Religion  The engagement between science and religion from a historical standpoint and a multicultural perspective. The Islamic, Jewish, Buddhist, and Christian traditions; the roots of modern creationism; salvation expectations and the rise of modern science and technology. General knowledge of Western and world history is expected. I. Dal Prete

HSHM 416a/HIST 414Ja, Engineering the Modern Body  Exploring the human body in relationship to technology and the larger cultural processes of industrialization, medicalization, and most recently, the digital age. From Victorians who sought restoration from illness with electric belts, to the popularization of cosmetic surgery and gene therapy after World War II, students examine how the body became a canvas for a variety of personal, civic, and national goals. R. Elder

HSHM 432b/ER&M 360b/HLTH 370b/SOCY 390b/WGSS 390b, Politics of Reproduction  Reproduction as a process that is simultaneously biological and social, involving male and female bodies, family formation, and powerful social institutions such as medicine, law, and the marketplace. Sociological research on reproductive topics such as pregnancy, birth, abortion, contraception, infertility, reproductive technology, and aging. Core sociological concepts used to examine how the politics of reproduction are shaped by the intersecting inequalities of gender, race, class, and sexuality. R. Almeling

HSHM 438b/HIST 473Jb, The Neurological Condition  Exploration of how science, medicine, and technology have shaped understanding the brain and nervous system as the center of human identity. Consideration of the theories of diminishing “nerve force,” the electric cures of the Victorian era, fMRIs, and the current Century of the Brain research. Topics include the rise of professional neurology and neuroscience, cultural meanings of nerves and the brain, and the intimate role of patients and human subjects in formulating this science from the nineteenth century to the present. R. Elder

HSHM 445a/HIST 142Ja/WGSS 453a, 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 468a/HIST 260Ja, Sex, Life, and Generation  Theories and practices of life, sex, and generation in Western civilization. Politics and policies of conception and birth; social control of abortion and infanticide in premodern societies; theories of life and gender; the changing status of the embryo; the lure of artificial life. I. Dal Prete

HSHM 471a or b, Directed Reading  Readings directed by members of the faculty on topics in the history of science, medicine, or public health not covered by regular course offerings. Subjects depend on the interests of students and faculty. Weekly conferences; required papers. I. Dal Prete

HSHM 479b/EVST 368b/HIST 491Jb/RLST 368b, The History of the Earth from Noah to Darwin  Young earth creationism and flood geology have long been among the most divisive features of American culture and politics. Yet a basic postulate is shared across the spectrum: for better or worse, the old age of the Earth is regarded as the recent
product of a secular science, consistently rejected by traditional Christianity. This seminar challenges this long-established narrative, by uncovering the surprising boldness, complexity, and societal diffusion of premodern debates on the history of the Earth, and of humankind itself. Students have opportunity to explore the nature, assumptions, and methods of Earth sciences before the advent of modern geology, to question ingrained assumptions about their relation to religion and society, and to place outstanding issues into historical perspective. How have the great monotheistic religions dealt with the possibility of an ancient Earth? Was a young creation always important in traditional Christianity? If not, what led to the emergence of young Earth creationism as a force to be reckoned with? What are the intellectual roots of American preadamism, which claims that the black and white races were created at different times and do not descend from the same ancestor? These and other questions are addressed not only through scholarly literature in the field, but also with the analysis of literary, visual, and material sources available on campus. I. Dal Prete

**HSHM 481a/AFAM 213a/HIST 383Ja, Medicine and Race in the Slave Trade** Examination of the interconnected histories of medicine and race in the slave trade. Topics include the medical geography of the slave trade from slave prisons in West Africa to slave ships; slave trade drugs and forced drug consumption; mental and physical illnesses and their treatments; gender and the body; British and West African medicine and medical knowledge in the slave trade; eighteenth-century theories of racial difference and disease; medical violence and medical ethics. C. Roberts

**HSHM 483b, Health, Disease, and Racial Difference in Modern America** Exploration of the meanings attributed to black-white differences in health from the late nineteenth century to the present with an emphasis on the mutual construction of race and health/disease. Topics include specific diseases, (cancer, heart disease, tuberculosis, HIV) as well as health activism, “health disparities” research, and genomics. S. Abedin

**HSHM 487a/HIST 479Ja, Disability, Science, and Society** Science and disability are inextricably linked. Since at least the nineteenth century, medical science and technology have helped to define disability as a “problem” in need of intervention rather than as the product of increasingly stringent social norms. The medical gaze, systems of quantification, rubrics of “normality,” eugenics, intelligence testing—each of these tools of science has reinforced hierarchies of difference while devaluing the experiences of persons with nonconforming bodies and brains. In this course we explore this fairly recent history, focusing on the experiences of people with a range of disabilities through the prism of modern science, medicine, and technology. From prosthetic limbs to neuro-enhancing drugs, we examine how nineteenth- and twentieth-century sciences have shaped definitions and experiences of disability. Course topics include the nineteenth-century “invention” of disability, medicalization and eugenics, access and infrastructure, social versus medical models of disability, notions of control and able-bodiedness, and the rise of disability activism in the final quarter of the twentieth century. R. Elder

**HSHM 658b, The History of the Laboratory** The social and cultural history of the experimental laboratory as a site for scientific activity, from early modern origins to the present day. The early modern origins of the laboratory; private, institutional, and
state laboratories; relations between labs and field stations; the lab in the colonial and developing world; industrial and corporate labs; laboratory architecture; secrecy and openness; gender in the experimental workplace; and popular representations of the laboratory. C. Ramalingam

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 vernacular and professional understandings of the body; the role of the marketplace in shaping professional identities and patient expectations; health activism and social justice; citizenship, nationalism, and imperialism; and the visual cultures of medicine. J.H. Warner

HSHM 710b/HIST 921b, Problems in Science Studies  Exploration of the methods and debates in the social studies of science, technology, and medicine. This course covers the history of the field and its current intellectual, social, and political positioning. It provides critical tools—including feminist, postcolonial, and new materialist perspectives—to address the relationships among science, technology, medicine, and society. L. Messeri

HSHM 716a/HIST 936a, Early Modern Science and Medicine  The course focuses on recent works in the history of science and medicine in the early modern world. We discuss how interdisciplinary approaches—including economic and urban history, sociology and anthropology of science, gender studies, art and colonial history—have challenged the classic historiographical category of “the Scientific Revolution.” We also discuss the avenues for research that new approaches to early modern science and medicine have opened up, placing special emphasis on the circulation of knowledge, practices of collecting, and visual and material culture. P. Bertucci

HSHM 753a/AMST 838a/HIST 749a, Research in Twentieth-Century United States Environmental History  Students conduct advanced research in primary sources and write original essays over the course of the term. Topics are particularly encouraged in twentieth-century environmental history (broadly defined, no specified geography) as well as in U.S. history, with a focus on politics, law, and economic development. Readings and library activities inform students’ research projects. Interested graduate students should contact the instructor with proposed research topics. P. Sabin

HSHM 770b/HIST 940b/WGSS 782b, Disability Histories: Research Seminar  This course introduces students to the major issues in current disability history as well as theoretical debates in disability studies. We discuss cultural, social, and political meanings of citizenship; efforts to define and classify disabled bodies; contested notions of bodily difference; and the ways disability has and continues to be used as a metaphor for socially defined inferiority like gender, race, or sexuality. By the fourth week students have identified the topic for their research papers and discussed them in class. The next month is devoted to research and writing. We start meeting again after spring break to read and discuss a draft of each paper. N. Rogers
In addition to formal course offerings and tutorials offered in the School of Medicine, Yale College, and the Graduate School of Arts and Sciences, 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 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

TAC S625, 203.785.3857
http://immunobiology.yale.edu

Professors J.R. Bender (Medicine), M.W. Bosenberg (Dermatology), A.L. Bothwell, H. Bottomly (Emeritus), L. Chen, T.H. Chi (Adjunct), J.E. Craft (Medicine), P. Cresswell, V.D. Dixit (Comparative Medicine), R.A. Flavell, D. Hafler (Neurology), K. Herold, A. Iwasaki, S. Kaech (Adjunct), P.B. Kavathas (Laboratory Medicine), R.M. Medzhitov, J.S. Pober, C.R. Roy (Microbial Pathogenesis), D.G. Schatz (Chair)

Associate Professors S.C. Eisenbarth (Laboratory Medicine), A.M. Haberman, S.H. Kleinstein (Pathology), J. MacMicking (Microbial Pathogenesis), E.R. Meffre, J.P. Pereira, C.V. Rothlin

Assistant Professors N. Joshi, M.A. Kriegel (Adjunct), C. Lucas, N. Palm, A. Ring

Research Scientists E. Esplugues, E.E. Eynon, T.D. Manes


For a complete listing of immunology-related courses, see http://bbs.yale.edu.

IBIO 503b, Responsible Conduct of Research, Refresher Course The NIH requires that students receive training in the responsible conduct of research every four years. This course meets that requirement for fourth-year students. The course has two components: (1) one large-group session is held for all fourth-year students through the BBS; the main topics are scientific misconduct and authorship; (2) two Immunobiology faculty facilitate discussions based on RCR topics, gathered in advance from the students; anonymous or hypothetical stories are selected by the faculty and discussed in a workshop environment in which students are then asked to analyze each case and suggest courses of actions.


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 530 or equivalent. Enrollment limited to fifteen. Staff

IBIO 532b, Inflammation This course covers fundamentals of inflammation from a broad biological perspective, with a focus on both physiological and pathological aspects of inflammation. R.M. Medzhitov
IBIO 536a, Advanced Immunology Seminar: Neuroimmunology  This course explores the diverse array of interactions between the immune and nervous systems, both in homeostasis and disease settings, including but not limited to neurodegenerative, vascular, and malignant diseases. Staff

IBIO 537b, Immunobiology Seminar: Translational Immunobiology  This course is designed to introduce immunobiology Ph.D. students to translational research and medicine. Each weekly seminar focuses on a specific disease with a conspicuous immunological component. In-class periods consist of very interactive, didactic sections covering disease phenotype, underlying immunobiology and pathology, and mechanisms of treatment approaches, including limitations. Discussions are led by principal investigators who focus on human translational immunology and by clinician-scientists who see patients in associated clinics. Examples of topics include: T and B cell contributions to the underlying pathophysiology of multiple sclerosis, type 1 diabetes, systemic lupus erythematosus, myasthenia gravis, and other autoimmune diseases; immune responses to acute brain injury; inherited immune disorders; paradigms governing how antitumor immune responses are promoted or suppressed; and current approaches in immunotherapy-based clinical trials. Assignments challenge students to think creatively about solutions to problems that obstruct the progress toward understanding disease mechanisms and developing therapeutics. A term assignment, in the form of a research proposal, focuses on independent study of a translational immunobiology problem of each student’s choosing. Students are provided with elective opportunities for experiential learning through clinic visits with course faculty instructors. The combination of medical knowledge and interaction with translational and clinician-scientists provides a new perspective to immunobiology Ph.D. students that broadens their basic science training. The exposure to the practice of medicine enables them (and other graduate students) to work more confidently at the interface of research and medicine and facilitate collaborations with clinical investigators. Prerequisite: IBIO 531 or a similar course that provides a solid foundation in fundamental immunology; may be waived for highly motivated students. K. O’Connor

IBIO 538a, Development of the Immune System  This limited-enrollment seminar can serve as one of the two required seminar courses for Immunobiology graduate students. The course addresses the principles underlying the evolution of immunity, comparing immune defense strategies across the major divisions of living organisms including bacteria, plants, invertebrates, and vertebrates. Major themes include immunity to viruses and endogenous mobile elements, molecules of immune recognition and mechanisms for their diversification, and the evolution of immune cells. A central goal of the course is for students to be able to use the knowledge gained to formulate hypotheses and identify important unanswered questions in the field of immune system evolution. The emphasis is on broad concepts and conceptual thinking regarding the origins of and links between the different strategies encountered. Assigned readings include review articles and papers from the primary literature, but students are expected to identify additional readings from the literature as they develop their ideas. Each class features two presentations by students on aspects of the week’s topic, as well as substantial input from other students.
Student evaluation is based on class participation, oral presentations, and a short written “synthesis” paper. Enrollment limited to twenty-two. Preference is given to students who need the requirement in Immunobiology.

[IBIO 540a, Translational Immunobiology] This course is designed to introduce immunobiology Ph.D. students to translational research and medicine. The course is arranged in modules, each of which focuses on a specific disease with a conspicuous immunological component. Each module consists of (1) didactic sections: covering disease phenotype, underlying immunobiology and pathology, and mechanisms of treatment approaches including their limitations; (2) patient contact: the view of the disease from the patient’s perspective including symptoms and treatment options; and (3) clinical section: taking place in the hospital environment, where students are exposed to disease management approaches. The combination of medical knowledge and personal interaction with patients and their physicians provides a new perspective to immunobiology Ph.D. students that will broaden their basic science training and enable them to work more confidently at the interface of research and medicine and facilitate collaborations with clinical investigators. Enrollment limited to twenty-five. Prerequisites: IBIO 530 and 531.

IBIO 600a, Introduction to Research: Faculty Research Presentations Introduction to the research interests of the faculty. Required of all first-year Immunology/BBS students. Pass/Fail. C.V. Rothlin

IBIO 601b/CB&B 601b, Fundamentals of Research: Responsible Conduct of Research A weekly seminar presented by faculty trainers on topics relating to proper conduct of research. Required of first-year Immunobiology students, first-year CB&B students, and training grant-funded postdocs. Pass/Fail. C.V. Rothlin

IBIO 611a, Research Rotation 1 Intensive experience in the design and execution of experiments in immunology or other areas of biology. Students design a focused research project in consultation with a faculty mentor and execute the designed experiments in the mentor’s laboratory. Students are expected to read relevant background papers from the literature, design and perform experiments, interpret the resulting data, and propose follow-up experiments. Students are also expected to attend the mentor’s weekly lab meeting(s) as well as weekly Immunobiology departmental seminars and Research in Progress seminars. The course concludes with the student giving a brief presentation of the work performed at Rotation Talks, attended by other first-year immunology-track graduate students. Evaluation is by the mentor; students also evaluate the rotation experience. Students must turn in a prioritized list of four possible mentors to Barbara Cotton in the office of the director of graduate studies at least one week prior to the beginning of the course. Mentors are assigned by the DGS. Graded Pass/Fail. 1 course credit; minimum of 20 hours/week. Required of all first-year Immunology/BBS students. C.V. Rothlin

IBIO 612b, Research Rotation 2 See description under IBIO 611a. C.V. Rothlin

IBIO 613b, Research Rotation 3 See description under IBIO 611a. C.V. Rothlin
INTERNAL MEDICINE

Boardman 110, 203.785.4119
http://medicine.yale.edu/intmed


Instructors

Senior Research Scientists
D.I. Baker, H. Binder (Medicine), A. Broadus (Medicine), S. Cai, G. Friedland (Medicine), L. Han, L. Leng, Y. Liu, R. Matthey (Medicine), S. Narasimhan, W. Philbrick, C.J. Soroka, P.H. Van Ness, A.V. Wisnewski, Z. Zhuang

Research Scientists

Associate Research Scientists

Clinical Professors
J. Borak, C. McPherson, D.N. Podell, B. Wu

Associate Clinical Professors

Assistant Clinical Professors

Clinical Instructors
A.Q. Bhutta, V. Glinskii, F. Lopez-Gonzalez, R. Mehrzad

**MD 2000 (IM)/MD 2025 (NEUR), Medical Approach to the Patient Clerkship**  This twelve-week integrated clerkship includes internal medicine (eight weeks) and neurology (four weeks) clinical components. Throughout the clerkship, students participate in integrated experiences that address the themes related to hospital-based care such as management of acute disease, diagnostic skills, transitions of care, quality improvement, and organ systems. Directors: D.B. DiCapua, D.W. Dunne

**MD 2050 (IM)/MD 2075 (Psych), Biopsychosocial Approach to the Patient Clerkship**  This twelve-week integrated clerkship comprises a six-week rotation in primary care and a six-week rotation in psychiatry. During the six-week primary care component, students spend 5–6 half-days each week working in a practice for adult primary care (i.e., general internal medicine, family medicine, or combined medicine/pediatrics) and 2–3 half-days each week working in a practice for general pediatrics. The psychiatry component of the clerkship includes three weeks of inpatient psychiatry, three weeks of consultation-liaison or emergency psychiatry, and six half-day sessions in a longitudinal outpatient psychiatry or integrated primary care–psychiatry clinic. Primary care and psychiatry each have distinct classroom exercises. However, an integrated classroom curriculum brings students together each Thursday afternoon to explore the many topics that overlap primary care and psychiatry, including mood disorders, anxiety disorders, substance abuse, somatic symptom disorder, and pain. Directors: P. Ellis, K.M. Wilkins; Codirectors: A.M. Fenick, M. Goldenberg

**IM 122, Endocrinology Elective**  The student participates as an active member of the endocrine training program, making daily rounds with the endocrine fellows, residents, and attending physicians. The student works primarily on the inpatient consult service at Yale New Haven Hospital and has the opportunity to attend selected endocrine clinics at YNHH and the West Haven VA Medical Center. The student also participates in the regularly scheduled metabolism-endocrine conferences. Full-time. One student every two or four weeks. Director: S.E. Inzucchi

**IM 123, Nephrology Elective**  This elective 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. An introduction to hemodialysis, peritoneal dialysis, renal transplantation, and renal biopsy histology is also provided. One student every two or four weeks. Director: J. Turner
IM 137, Gastroenterology Elective  The student is an integral part of the inpatient GI consult service, working primarily in an inpatient setting. This is an opportunity to see a wide variety of gastrointestinal problems and patients, with discussion and review. Open to fourth-year students only. One or two students every two or four weeks. Directors: T. Muniraj (two-week); H. Sachar, S.Jakab (four-week)

IM 141, Cardiology Elective  The student participates in the daily activities of the inpatient cardiology consult service, including rounds, consultations, and conferences, and gains exposure to procedures such as cardiac catheterization, stress testing, echocardiography, nuclear imaging, and electrocardiography. The training experience emphasizes the physiologic basis for clinical manifestations and therapy of cardiovascular diseases. A collection of pertinent review articles is provided. Limited to one student at Yale New Haven Hospital every four weeks and one student at the VA Connecticut Healthcare System, West Haven, every two or four weeks. Directors: J. Brennan, C. Ionescu (YNHH); B.J. Malm (VAMC)

IM 142, Infectious Disease Elective  This elective offers a robust learning experience in general infectious diseases, including the diagnostic evaluation and management of common community-acquired and nosocomial infections in a diverse patient population, as well as infections in the immunocompromised patient. There are opportunities for learning in subspecialty areas such as medical microbiology, transplant ID, HIV/AIDS, hospital infection control, antimicrobial stewardship, and sexually transmitted diseases. Students participate as active members of the consultation and training program in infectious diseases at Yale New Haven Hospital and are expected to attend and participate in daily attending rounds, microbiology rounds four times a week, weekly clinical case conferences, and monthly journal clubs. Evaluations are based primarily on performance in clinical case presentations on the consult service. One student every two or four weeks. Director: O. Ogbuagu

IM 146, Hematology Elective  This elective provides intensive exposure to clinical hematology by direct participation in the activities of a regular clinical hematology service. Students work up new patients and consults in rotation with the fellows and residents, and attend outpatient clinics. Students participate in daily hematology ward rounds and bone marrow readings, and in weekly inpatient and outpatient clinical reviews and clinical research conferences. One student every two or four weeks. Director: A.I. Lee

IM 152, Occupational and Environmental Medicine Elective  This rotation is designed to provide senior medical students (and PA and nursing students) with an introduction to the principles and practice of occupational and environmental medicine, including exposure, assessment, and evaluation of disease causality. Students learn how to evaluate workplace and environmental exposures and assess the contribution of such exposures to patients’ diseases. In addition, students participate in ongoing didactic and research conferences and workplace surveillance programs, and they visit workplaces and other environmental sites that are being evaluated for their role in disease causation. Students are exposed to the varied opportunities for careers in this discipline. One student every two or four weeks. Director: J.M. Cook
IM 155, Internal Medicine Subinternship  The subinternship offers students the opportunity to function in the role of an intern on an Internal Medicine inpatient team at Yale New Haven Hospital or West Haven VA Medical Center. Students join a team consisting of an upper-year medical resident and an attending physician and are responsible for admitting patients, writing admission and daily progress notes, presenting cases on rounds, communicating with consultants, ordering medications and tests, and serving as the front-line physician for patients admitted to the hospital. Students are responsible for managing approximately half the number of patients typically managed by an Internal Medicine intern. The subinternship offers an outstanding opportunity to prepare for internship, whether the student intends to pursue a career in Internal Medicine or another specialty. Prerequisites: third-year Internal Medicine clerkships. Four weeks. Director: M.D. Siegel

IM 156, Hepatology Elective  The student is an integral part of the inpatient liver service, working primarily in an inpatient setting. This is an opportunity to see a wide variety of liver problems and patients, with discussion and review. Open to fourth-year students only. One or two students every two or four weeks. Director: S. Jakab

IM 159, Pulmonary Elective  This elective is designed to provide students with an in-depth knowledge of respiratory diseases through consults on the patient care floors and through didactic sessions and directed reading. Students become an integral part of the pulmonary and critical care (PCCM) section consult service, working with the attending physician and PCCM fellow(s). From two to six new consults on average are seen daily. Students work closely with faculty and staff of the pulmonary group and participate in daily consulting and rounds. Students assist in the examination and treatment of patients with various cardiopulmonary diseases, including tuberculosis, chronic obstructive airway disease, asthma, lung cancer, bacterial and fungal lung infection, and other diagnostic problems. They receive practical instruction in chest images and pulmonary function tests and their interpretation, and in clinical and laboratory methods used for diagnosis and management, including intensive respiratory care and respiratory therapy, and they have an opportunity to observe fiberoptic bronchoscopy. Weekly didactic lectures are given in a number of areas relating to airway pharmacology, lung cell biology, and lung immunology (respiratory cells, immunologic reactions, etc.). Students are expected to learn (1) the differential diagnosis and treatment of respiratory disorders, (2) how to interpret pulmonary function tests, and (3) how to read a chest radiograph and understand the essentials of a chest CT scan. One student every two or four weeks. Director: B. Clark

IM 180, Rheumatology Elective  Students work closely with the faculty member and fellow assigned to the inpatient consultative service at both Yale New Haven Hospital and the West Haven VA Medical Center. They attend rounds and evaluate patients with rheumatic conditions and other diseases with rheumatic manifestations. In addition, they participate in outpatient clinics, including two arthritis clinics and two general rheumatology clinics, and attend two weekly conferences sponsored by the Section of Rheumatology. One student every two or four weeks. Directors: J. Evans, F. Koumpouras
IM 181, Oncology Outpatient or Inpatient Elective  This is an advanced elective offered to students who have completed the third-year Internal Medicine Clerkship. It is designed to expose students to all aspects of clinical medical oncology by direct participation in the daily disease-specific outpatient oncology clinics at Yale Cancer Center. Working closely with the medical oncology fellows and attending physicians, students have the opportunity to work up patients with new cancer diagnoses and participate in the ongoing care of patients with diverse cancer diagnoses. Students participate as active members of the medical oncology training program, attending the regularly scheduled daily clinical conferences as well as weekly disease-specific multidisciplinary tumor boards and medical oncology fellow education conferences. Although the emphasis of the elective is on outpatient oncology in disease-specific units, students can also opt to work with the inpatient oncology team at Yale New Haven Hospital. Rotations at the VA Cancer Center can be arranged as well. Maximum of three students every two or four weeks. Director: S.M. Stein

IM 195, Medical Intensive Care Elective  This elective provides an opportunity to participate in the acute management of common medical emergencies. Students are on call in the medical intensive care unit (MICU) at Yale New Haven Hospital every fourth day with an intern and resident pair, assisting them in the admission of patients. Students follow patients in the MICU, assist in their care with the intern and resident, and are expected to present during rounds. Although students are exposed to a variety of ICU-based procedures, there are limited “hands-on” opportunities. Prerequisite: Internal Medicine Clerkship. No overnight responsibilities. One or two students every two or four weeks. Director: S. Honiden

IM 201, Ambulatory Subinternship  This one-year weekly outpatient subinternship in the adult Primary Care Center provides experience in the longitudinal care of Internal Medicine patients. Students are directly responsible for care of medical problems and preventive care as well as coordination of specialty care for their own patient panel. The clinic is held every Wednesday evening, 5:15–8:30 p.m., except the day before Thanksgiving and between Christmas and New Year’s. Students are responsible for three patient visits/sessions. Weekly pre-clinic conferences begin at 4:45 and include journal club and primary care case-centered topics presented by students. The subinternship is open to a limited number of students who have completed at least half of their clerkships (M.D./Ph.D.) or all of their clerkships (M.D.). Students must have completed the Medical Approach to the Patient clerkship. Completion of the Biopsychosocial Approach to Health Clerkship (clerkship components—Primary Care and Psychiatry) is highly recommended. Director: P. Oray-Schrom

IM 304, Analytical Clinical Cardiology Elective  This rotation emphasizes a rigorous history and physical exam to develop a differential diagnosis to guide the care of patients in the hospital and clinic. Supplementary reading on topics arising from the management of the patients is an important component of the experience. Interested students should discuss their goals prior to the rotation. One student every two weeks. Director: J.E. Gage
IM 306, Allergy and Immunology Elective  Students attend the Allergy & Immunology Clinic for adults at the Yale Allergy & Immunology Center in North Haven and the Allergy & Immunology Pediatric Clinic at Long Wharf. It is recommended that they attend the weekly Allergy and Clinical Immunology Seminar, followed by case discussions and Journal Club. They may also join in consultations with the Allergy & Immunology service at Yale New Haven Hospital. Prerequisite: Immunobiology course. One or two students every two or four weeks. Director: C. Price

IM 312, Geriatric Medicine Elective  An introduction to the continuum of care for older adults. Students gain an understanding of the various geriatric syndromes that affect functions in the aging population and learn to identify basic geriatric syndromes such as memory loss, delirium, depression, falls, and polypharmacy. In addition, they are exposed to care planning, palliative care, and end-of-life care issues in a variety of settings, including hospital, subacute long-term care and outpatient sites, and system-wide consultation services. Prerequisite: Internal Medicine clerkships. One student every two or four weeks. Director: G.J. Kerins

IM 361, Re-Entry to Clinical Medicine Elective  The goal of this elective is to reinforce students’ clinical skills following their time away from clinical medicine. The emphasis is on history taking, physical examination skills, interpretation of data, morning presentations, medical terminology, patient communication, and coordination of care. Students are assigned to a team that consists of one intern, one resident, and one attending physician; or they may be assigned to a hospitalist team that consists of one attending physician and possibly a PA. Students are expected to perform at the clerkship level, performing admission history and physical exams, and following/presenting patients on daily rounds, with supervision. History, physical diagnosis, and laboratory interpretation skills are emphasized. One student every two or four weeks. Director: T.H. Taddei

Yale New Haven Hospital Saint Raphael Campus Electives

IM 326, Geriatric Medicine Elective  This elective provides an opportunity to diagnose and manage geriatric syndromes in a variety of settings, including inpatient consultation service, outpatient geriatric assessment clinic, and nursing homes. Students work up and follow patients and participate in weekly team conferences. One student every two or four weeks. Director: G.J. Kerrins

IM 327, Critical Care Elective  Senior students participate in critical care medicine activities in the medical intensive care unit (MICU). The emphasis is on evaluation and acute management of respiratory failure, shock, and sepsis, and on the use of invasive monitoring. The physiological basis of disease and the rationale for therapeutic interventions are also emphasized. One student every two or four weeks. Director: A. Uzunpinar
**INVESTIGATIVE MEDICINE**

2 Church Street South, Suite 112, 203.785.6842  
http://medicine.yale.edu/investigativemedicine

**Professors**  

**Associate Professor**  
L.S. Dugdale

**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 clinical 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 23–August 3, 2018. E.D. Shapiro, D.A. Fiellin

**IMED 630a, Ethical Issues in Biomedical Research**  
This term-long course addresses topics that are central to the conduct of biomedical research, including the ethics of clinical investigation, conflicts of interest, misconduct in research, data acquisition, and protection of research subjects. Practical sessions cover topics such as collaborations with industry, publication and peer review, responsible authorship, and mentoring relationships. Satisfactory completion of this course fulfills the NIH requirement for training in Responsible Conduct of Research. Format consists of lecture presentation followed by discussion. Consent of instructor required. J.E. Craft

**IMED 635a, 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. Four sessions are required; dates/times by arrangement. Consent of instructor required.

**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 9–20, 2018. E.D. Shapiro

**IMED 655b, Writing Your Career Development (K-type) Grant**  
In this term-long course, students gain intensive, practical experience in evaluating and preparing grant proposals, including introduction to NIH study section format. The course gives new clinical investigators the essential tools to design and 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 for a K-type mentored career development award. Attendance and active participation are required. There may be spaces to audit the course. Consent of instructor required. E.D. Shapiro

IMED 660a, Methods in Clinical Research, Part I  This yearlong course (with IMED 661 and 662), 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 participatory research, and health policy. Consent of instructor required. E.D. Shapiro

IMED 661a, Methods in Clinical Research, Part II  This yearlong course (with IMED 660 and 662), 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 participatory research, and health policy. Consent of instructor required. E.D. Shapiro

IMED 662b, Methods in Clinical Research, Part III  This yearlong course (with IMED 660 and 661), 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 participatory research, and health policy. Consent of instructor required. E.D. Shapiro

IMED 670b, Writing Your First Independent Investigator-Initiated (R-type) Grant  In this term-long course, students gain intensive, practical experience in evaluating and preparing grant proposals, including discussion of NIH study section format. The course is particularly designed to help investigators in the “K to R” transition period. The course is limited to students who plan to submit an R-type (e.g., R01 or R21) grant, as well as VA and foundation grant proposals. Attendance and active participation are required. Consent of instructor required. E.D. Shapiro

IMED 680b/B&BS 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 provides 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.E. Craft

IMED 900a and 901b, Independent Research
LABORATORY MEDICINE

PS 210, 203.688.2286
http://medicine.yale.edu/labmed


**Associate Professors**  T. Eid, S.C. Eisenbarth, J. Hendrickson, J.G. Howe, C. Tormey

**Assistant Professors**  J.M. El-Khoury, E.F. Foxman, E. Gehrie (*Adjunct*), R. Harb, R.G. Hauser, D.R. Peaper, A. Siddon, R. Torres, A.J. Williams (*Adjunct*), M.L. Xu (*Pathology*)

**Instructors**  B. Bahar, A. Gokhale

**Senior Research Scientists**  G. Anderson (*Child Study Center*), S.F. Cotmore

**Research Scientist**  R. Rai

**Associate Research Scientists**  A. Bersenev, L. Devine, P. Gu, D. Liu, J. Liu, Y. Lu, I.S. Mihaylov, E.M. Olson, P. Zhang

**Lecturers**  D.J. Barchi, P.E. Marone, R.L. Ross

LMED 131, Laboratory Medicine Clinical Elective  This elective offers rotations through the clinical laboratories, including Blood Bank, Therapeutic Apheresis, Clinical Chemistry, Toxicology, Hematology and Coagulation, Flow Cytometry, Immunology, Molecular Diagnostics, Microbiology, and Virology. Students work closely with residents, fellows, attending physicians, and laboratory staff; work up clinical cases under supervision; and attend morning report, case conference, journal club, clinical rounds, and didactic sessions. Students also have the opportunity to work with the resident on call for at least one weekend day during the elective. Students 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 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. One or two students every two or four weeks. Director: M. Landry

LMED 619/PATH 619, Anatomic Pathology and Laboratory Medicine Combined Elective  The goals for anatomic pathology are to understand the basic principles of diagnostic anatomic pathology and its role in clinical medicine. The goals for laboratory medicine 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 and/or pathology, and for all students who will use laboratory and pathology tests in their careers. One or two students every four weeks. Director: A. Adeniran
Laboratory Medicine Sessions  The purpose of the Laboratory Medicine Sessions is to introduce third-year medical students and PA students to basic concepts of laboratory diagnosis. On the first afternoon of their Internal Medicine clerkship at Yale New Haven Hospital, students rotate through four laboratories—Chemistry, Hematology, Blood Bank, and Microbiology/Virology—where faculty demonstrate principles of laboratory medicine using clinical case materials. Different test methods and clinical cases are presented. M. Landry and associates
MICROBIAL PATHOGENESIS

BCMM 336E, 203.737.2404
http://medicine.yale.edu/micropath

Professors  M. Cappello (Pediatrics), E. Fikrig (Medicine), J.E. Galán (Chair), E. Groisman, B.I. Kazmierczak (Medicine), W.H. Mothes, C.R. Roy

Associate Professors  C. Ben Mamoun (Medicine), C.S. Dela Cruz (Medicine), A. Goodman, R.M. Johnson (Medicine), P. Kumar (Medicine), B.D. Lindenbach, J. Liu, J.D. MacMicking, R. Sutton (Medicine)

Assistant Professors  Y. Ho, H. Rego


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


MBIO 561a/CB&B 561a/MB&B 561a/MCDB 561a/PHYS 561a, Introduction to Dynamical Systems in Biology  Study of the analytic and computational skills needed to model genetic networks and protein signaling pathways. Review of basic biochemical concepts including chemical reactions, ligand binding to receptors, cooperativity, and Michaelis-Menten enzyme kinetics. Deep exploration of biological systems including: kinetics of RNA and protein synthesis and degradation; transcription activators and repressors; lysogeny/lysis switch of lambda phage and the roles of cooperativity and feedback; network motifs such as feed-forward networks and how they shape response dynamics; cell signaling, MAP kinase networks and cell fate decisions; bacterial chemotaxis; and noise in gene expression and phenotypic variability. Students learn to model using MATLAB in a series of in-class hackathons that illustrate biological examples discussed in lectures. D. Clark, J. Howard, K. Miller-Jensen

MBIO 601b, Fundamentals of Research: Responsible Conduct of Research  A weekly seminar presented by faculty trainers on topics relating to proper conduct of research. Required of first-year Immunobiology students and training grant-funded postdocs. Pass/Fail.

MBIO 670a, 671b, 672b, Laboratory Rotations  Rotation in three laboratories. Required of all first-year graduate students. W.H. Mothes

MBIO 680b/EMD 680b, Advanced Topics in Tropical Parasitic Diseases  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. C. Tschudi

**MBIO 685b, 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. A. Goodman

**MBIO 686a, Bacterial Determinants of Pathogenesis**  The course provides an introduction to basic principles in bacterial pathogenesis. Topics focus on the bacterial determinants mediating infection and pathogenesis, as well as strategies to prevent and treat diseases. 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. E. Groisman

**MBIO 700b, Seminal Papers on the Foundations of Modern Microbiology**  A required course for Microbiology first- and second-year students; not for credit. The course is offered every other year, alternating with MBIO 703, so that it can be taken once during each student’s tenure in the program. 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 has a major impact on current biomedical research. P. Kumar

**MBIO 701a and 702b, 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 the student’s own work before a sympathetic but critical audience and to familiarize the faculty with the research. W.H. Mothes

**MBIO 703a and 704b, 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. W.H. Mothes

**[MBIO 705b, Evasion of Host Defense by Viruses, Bacteria, and Eukaryotic Parasites]**  The course, in student seminar format, is required of all first- and second-year Microbiology graduate students. Subjects include strategies employed by viruses, bacteria, or eukaryotic parasites to evade either cell intrinsic defenses, such as programmed cell death or innate immune sensing, or responses operating at the level of the organism, such as the adaptive immune response.]

**[MBIO 734b/GENE 734b/MB&B 734b, Molecular Biology of Animal Viruses]**  Lecture course with emphasis on mechanisms of viral replication, oncogenic transformation, and virus-host cell interactions.]
MOLECULAR BIOPHYSICS AND BIOCHEMISTRY

336 Bass, 203.432.5662; SHM C106, 203.785.4595
http://medicine.yale.edu/mbb


Associate Professors  T.J. Bogon (Pharmacology), W.V. Gilbert, M.R. Koelle, C. Schlieker, M. Simon, C.V. Sindelar, S. Takyar (Medicine), H. Wang (Adjunct), Y. Xiong

Assistant Professors  J. Berro, E. Karatekin (Cellular & Molecular Physiology), N. Malvankar, C. Paulsen

Senior Research Scientist  N.D. Grindley

Research Scientists  J. Burton, W. Cao, E.J. Folta-Stogniew, T.T. Lam, J.S. Rozowsky, K. Tycowski, J. Wang, S. Wu (Pharmacology)


Lecturers  I. Baine (Pathology), A. Belperron (Medicine), T. Kim (Medicine), A.B. Pawashe, J. Weinstein (Medicine)

MB&B 500a/MCDB 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. R.R. Breaker, D.M. Engelman

[MB&B 517b/ENAS 517b/MCDB 517b/PHYS 517b, Methods and Logic in Interdisciplinary Research  This half-term PEB class is intended to introduce students to integrated approaches to research. Each week, the first of two sessions is student-led, while the second 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 of students in PEB.]

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 of students in PEB. C. O’Hern

**MB&B 523b/CB&B 523b/ENAS 541b/PHYS 523b, Biological Physics** The course has two aims: (1) to introduce students to the physics of biological systems and (2) to introduce students to the basics of scientific computing. The course focuses on studies of a broad range of biophysical phenomena including diffusion, polymer statistics, protein folding, macromolecular crowding, cell motion, and tissue development using computational tools and methods. Intensive tutorials are provided for MATLAB including basic syntax, arrays, for-loops, conditional statements, functions, plotting, and importing and exporting data. S. Mochrie

**MB&B 561a/CB&B 561a/MBIO 561a/MCDB 561a/PHYS 561a, Introduction to Dynamical Systems in Biology** Study of the analytic and computational skills needed to model genetic networks and protein signaling pathways. Review of basic biochemical concepts including chemical reactions, ligand binding to receptors, cooperativity, and Michaelis-Menten enzyme kinetics. Deep exploration of biological systems including: kinetics of RNA and protein synthesis and degradation; transcription activators and repressors; lyosogeny/lysis switch of lambda phage and the roles of cooperativity and feedback; network motifs such as feed-forward networks and how they shape response dynamics; cell signaling, MAP kinase networks and cell fate decisions; bacterial chemotaxis; and noise in gene expression and phenotypic variability. Students learn to model using MATLAB in a series of in-class hackathons that illustrate biological examples discussed in lectures. D. Clark, J. Howard, K. Miller-Jensen

**MB&B 562b/AMTH 765b/CB&B 562b/ENAS 561b/MCDB 562b/PHYS 562b, Dynamical Systems in Biology** This course covers advanced topics in computational biology. How do cells compute, how do they count and tell time, how do they oscillate and generate spatial patterns? Topics include time-dependent dynamics in regulatory, signal-transduction, and neuronal networks; fluctuations, growth, and form; mechanics of cell shape and motion; spatially heterogeneous processes; diffusion. This year, the course spends roughly half its time on mechanical systems at the cellular and tissue level, and half on models of neurons and neural systems in computational neuroscience. Prerequisite: MCDB 561a or equivalent, or a 200-level biology course, or permission of the instructor. T. Emonet, J. Howard

**MB&B 591a/ENAS 991a/MCDB 591a/PHYS 991a, Integrated Workshop** This required course for students in PEB 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 is acquired, and students learn from each other. Modules are hosted in faculty laboratories. Receives no course credit toward MB&B graduate course requirements. With permission of the DGS, can be used by PEB students to replace the third rotation of MB&B 650 but will receive no separate course credit toward MB&B course requirements. C. O’Hern, M. Bosenberg, M.B. Gerstein, S. Holley, N. Malvankar, M. Murrell, M. Venkadesan
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.R. Koelle, E.M. De La Cruz, C. Paulsen, M. Simon

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.
C. Schlieker, K. Neugebauer

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. Prerequisites: none, but some knowledge of basic cell biology and biochemistry is assumed. Students who have not taken courses in these areas can prepare by reading relevant sections in basic molecular cell biology texts. We recommend Pollard et al., Cell Biology (3rd ed., 2016), Alberts et al., Molecular Biology of the Cell (6th ed., 2014), or Lodish et al., Molecular Cell Biology (8th edition, 2016).

MB&B 625a/GENE 625a/MCDB 625a, 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.
J. Lu

MB&B 630b/MCDB 630b, Biochemical and Biophysical Approaches in Molecular and Cellular Biology  This 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 BQBS graduate students.
T.D. Pollard, K.M. Reinisch

MB&B 635a/ENAS 518a, Quantitative Approaches in Biophysics and Biochemistry  The course offers an introduction to quantitative methods relevant to analysis and interpretation of biophysical and biochemical data. Topics covered include statistical testing, data presentation, and error analysis; introduction to dynamical systems; analysis of large datasets; and Fourier analysis in signal/image processing and macromolecular structural studies. The course also includes an introduction to basic programming skills and data analysis using MATLAB. Real data from research groups in MB&B are used for practice. Prerequisites: MATH 120 and MB&B 600a or equivalents, or permission of the instructors.
J. Berro, J. Howard, Y. Xiong
MB&B 650a and 651b, Lab Rotation for First-Year Students  Required of all first-year BQBS graduate students. Credit for full year only. Y. Xiong

MB&B 675a, Seminar for First-Year Students  Required of all first-year BQBS graduate students. Y. Xiong, K.S. Anderson

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 of all first-year BQBS graduate students. S.J. Baserga, J. Berro, M.B. Gerstein, W.V. Gilbert, J. Howard, K. Neugebauer, C. Schlieker, D.G. Söll

MB&B 710b/C&MP 710b, Electron Cryo-Microscopy for Protein Structure Determination  Understanding cellular function requires structural and biochemical studies at an ever-increasing level of complexity. The course is an introduction to the concepts and applications of high-resolution electron cryo-microscopy. This rapidly emerging new technique is the only method that allows biological macromolecules to be studied at all levels of resolution from cellular organization to near atomic detail. Counts as 0.5 credit toward MB&B graduate course requirements. F.J. Sigworth, C.V. Sindelar

MB&B 720a, 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.D. Miranker, Y. Xiong

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 BQBS. M.J. Solomon, S. Holley, A.J. Koleske, C. Schlieker

[MB&B 734b/GENE 734b/MBIO 734b, Molecular Biology of Animal Viruses  Lecture course with emphasis on mechanisms of viral replication, oncogenic transformation, and virus-host cell interactions.]

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.W. Hochstrasser, W.V. Gilbert

MB&B 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
MB&B 750b, Biological Membranes  Biological membranes and their resident proteins are essential for cellular function; yet comparatively little is known about their structure and dynamics. This class provides an introduction to the biochemistry and biophysics of lipids, lipid bilayers, and lipid-derived second messengers. In addition, structural as well as functional aspects of the different classes of membrane proteins are discussed along with an outline of experimental approaches used to achieve an understanding of membrane protein structure and function at a molecular level. Counts as 0.5 credit toward MB&B graduate course requirements. Prerequisite: biochemistry. J.A. Steitz, D. DiMaio, W.V. Gilbert, I.G. Miller, K. Neugebauer, D.G. Schatz, T.A. Steitz

MB&B 752b/MB&B 752b/CPSC 752b/MCDB 752b, Biomedical Data Science: Mining and Modeling  Biomedical data science 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 to data integration. Prerequisites: biochemistry and calculus, or permission of the instructor. M.B. Gerstein

MB&B 753b, Biomedical Data Science: Mining  Biomedical data science 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. This module of the full-term course MB&B 752b focuses on the first of these techniques, data mining. Specific topics include sequence alignment, comparative genomics and phylogenetics, biological databases, microarray normalization, and machine-learning approaches to data integration. Counts as 0.5 credit toward MB&B graduate course requirements. Prerequisites: biochemistry and calculus, or permission of the instructor. M.B. Gerstein

MB&B 754b, Biomedical Data Science: Modeling  Biomedical data science 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. This module of the full-term course MB&B 752b focuses on the second of these techniques, simulation. Specific topics to be covered include geometric analysis of protein structure, molecular-dynamics simulation, and biological networks. Counts as 0.5 credit toward MB&B graduate course requirements. Prerequisites: biochemistry and calculus, or permission of the instructor. M.B. Gerstein

[MB&B 760a, 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.]

**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.J. Baserga, W.H. Konigsberg

**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. Y. Xiong

**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. Y. Xiong

**MB&B 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. Y. Xiong
NEUROLOGY

LCI 910, 203.737.1860
http://medicine.yale.edu/neurology


Instructors  Z.A. Corbin, A. Fesharaki-Zadeh (Psychiatry), A.A. Kohli (Ophthalmology & Visual Science), M. Lincoln, S. Schaefer

Senior Research Scientist  S.D. Dib-Hajj

Research Scientist  J. Bai


Associate Clinical Professors  N.S. Werdiger, R.S. Young (Pediatrics)

Assistant Clinical Professors  R. Duckrow, D. Machado, D. Richardson, M. Rosen (Orthopaedics & Rehabilitation), M.J. Stransky

Clinical Instructor  V. Shih (Orthopaedics & Rehabilitation)

Lecturer  L. Bandaru

MD 2025 (NEUR)/MD 2000 (IM), Medical Approach to the Patient Clerkship  This twelve-week integrated clerkship includes internal medicine (eight weeks) and neurology (four weeks) clinical components. Throughout the clerkship, students participate in integrated experiences that address the themes related to hospital-based care such as
management of acute disease, diagnostic skills, transitions of care, quality improvement, and organ systems. Directors: D.B. DiCapua, D.W. Dunne

**NEUR 200, Neurology Ward Service Elective** Under appropriate supervision, students directly examine, diagnose, and manage patients on the neurology ward service at Yale New Haven Hospital; attend daily teaching rounds; and attend a series of special didactic conferences on the most important topics in neurology. Open to fourth- and fifth-year students only. One student every four weeks. Director: D.B. DiCapua

**NEUR 201, Neurology Consult Service Elective** Under the supervision of the neurology consult resident and attending physician, students evaluate patients referred for neurologic consultation from other inpatient services at Yale New Haven Hospital. Students also participate in academic activities of the department. Open to fourth- and fifth-year students only. One student every four weeks. Director: D.B. DiCapua

**NEUR 202, Neurology Clinical Elective (Tailored)** Students work directly with attending faculty, chief residents, and junior residents as well as other medical students, rotators, and support staff. A series of special didactic conferences on the most important topics in neurology are provided, and the student also participates in departmental conferences and seminars. An assessment of history taking, neurological examining skills, and problem assessment is performed by an attending faculty member with each student. At times, other customized electives may be designed with the program director in areas such as epilepsy, stroke, movement disorders, neuroimmunology, etc., as well as clinical neurophysiology and research methods. Prerequisite: completion of the neurology portion of Medical Approach to the Patient. One student every two weeks. Director: D.B. DiCapua

**NEUR 400, Neurology Subinternship** The goal of this subinternship is for the student to recognize and understand less common neurological problems, including multiple sclerosis, Parkinson's disease and other movement disorders, neuromuscular diseases, dementia, central nervous system infections, and tumors of the nervous system. At times, other customized subinternships may be designed with the program director in areas such as epilepsy, stroke, movement disorders, neuromuscular medicine, neuroimmunology, and neurocritical care. Prerequisite: completion of the neurology portion of Medical Approach to the Patient. One student every four weeks. Director: D.B. DiCapua
NEUROSCIENCE

SHM C303, 203.785.4323
http://medicine.yale.edu/neuroscience

**Professors**

**Associate Professors**
M. Alreja (Psychiatry), C.J. Bruce, J.A. Cardin, S.S. Chandra, D. Colon-Ramos, K.P. Cosgrove (Psychiatry), M. Hammarlund, M.J. Higley, I. Kim (Ophthalmology & Visual Science), I. Levy (Comparative Medicine), C. Li (Psychiatry), J. Lim, A. Louvi (Neurosurgery), D.S. Navaratnam (Neurology), M.L. Schwartz, J.V. Verhagen

**Assistant Professors**
M.O. Dietrich (Comparative Medicine), G. Dragoi (Psychiatry), J.L. Gerrard (Neurosurgery), E. Gracheva, J. Guo, E. Hoffman (Child Study Center), M. Jadi (Psychiatry), C.A. Kwan (Psychiatry), J. Murray (Psychiatry), S. Yogev

**Senior Research Scientists**
N. Carnevale, M. Hines, D.A. McCormick (Neuroscience)

**Research Scientists**
A. Duque, Y. Morozov, L.D. Selemon, M. Wang

**Associate Research Scientists**

[NBIO 532a/INP 532a, Neurobiology of Cortical Systems](#) This is a lecture, reading, and discussion-based course focused on the mammalian cerebral cortex. Students learn about the evolution, development, function, and dysfunction of the cortex. Significant emphasis is placed on examining unique aspects of the cortex, including cortical circuit structure, plasticity, cognition, and models of higher-order cognitive processing. We also examine disease processes in which cortical dysfunction is specifically implicated. Offered every other year. M.C. Crair, D. Lee]
NEUROSURGERY

TMP 4, 203.785.2805
http://medicine.yale.edu/neurosurgery

Professors  J.M. Bachring (Neurology), H. Blumenfeld (Neurology), A. Bordey, R.A. Bronen (Radiology & Biomedical Imaging), V.L. Chiang, R.T. Constable (Radiology & Biomedical Imaging), N.C. DeLanerolle (Emeritus), C.C. Duncan, C.A. Greer, M. Gunel (Chair), M.H. Johnson (Radiology & Biomedical Imaging), C.C. LaMotte (Emeritus), L. Meng (Anesthesiology), J.M. Piepmeier, D.E. Redmond, Jr. (Psychiatry), D.D. Spencer, A.N. Van den Pol

Associate Professors  K.M. Abbed, M.L. DiLuna, J.T. King, A. Louvi, C.C. Matouk, J. Schindler, K.N. Sheth (Neurology)

Assistant Professors  C. Benjamin, T. Eid (Laboratory Medicine), J.L. Gerrard, K.T. Kahle, M.S. Laurans, J. Moliterno Gunel, P. Tomak, K. Wu, J. Zhou

Instructor  R. Grant

Research Scientists  E. Erson Omay, K. Mishra, K. Yasuno


Assistant Clinical Professors  J. Bartolomei, P. Doherty, L. Kolb

NEUS 101, Neurosurgery Subinternship  The subinternship allows senior medical students the opportunity to vastly extend their breadth of knowledge of neurological diseases and how they are managed both surgically and nonsurgically. Subinterns function essentially as a supervised intern, working closely with the cohesive group of mid-level providers, residents, and attending physicians in the inpatient, outpatient, and operating room settings. Subinterns are expected to participate in the evaluation and management of assigned patients, pre-round with writing of ICU notes, make rounds and attend clinics, assist in ICU procedures and surgeries, and attend academic conferences. Subinterns are expected to present their scholarly work at one of our academic conferences. The service is a busy one, and subinterns will have a wide range of surgical and clinical experiences. Examples of surgeries frequently encountered include, but are not limited to, aneurysm surgery with craniotomy or endovascular coiling or stenting; carotid endarterectomy; pediatric skull and spine reconstruction and repairs; brain tumor surgery, including awake craniotomy, epilepsy surgery, transnasal surgery, and deep brain stimulation; and spine surgery, including minimally invasive and deformity correction surgery. Required of all Yale School of Medicine students planning to enter the match for neurosurgery. Maximum of four students every four weeks. M.L. DiLuna
OBSTETRICS, GYNECOLOGY, AND REPRODUCTIVE SCIENCES

FMB 307, 203.785.4212, Janice Crabtree, Manager of Medical Education
http://medicine.yale.edu/obgyn


Associate Professors  V.M. Abrahams, M.O. Bahtiyar, F. Galerneau, X. Gao (Comparative Medicine), J.B. Henrich (Medicine), G. Huang, Y. Huang, J.L. Illuzzi, H.S. Lipkind, U. Magriples, V. Parkash (Pathology), C.M. Pettker, E. Ratner, L.M. Rickey (Urology), A.K. Sfakianaki, D. Silasi, N.L. Stanwood, X. Xu


Senior Research Scientists  S.M. Guller, R.B. Hochberg, G.B. Huszar, N.S. Stachenfeld

Research Scientists  A. Alvero, H.J. Kliman, G. Krikun, Z. Lin, R. Mamillapalli


Clinical Professors  M. Minkin, M. Polan, S. Vermund (Public Health)

Associate Clinical Professor  S.J. Fleischman

Assistant Clinical Professors  R. Chosak, D.M. Lima

Clinical Instructors  M. DiMaio, C. Negron

MD 2150 (OBGY)/MD 2175 (PEDS), Women and Children’s Health Clerkship  This twelve-week integrated clerkship includes clinical components in obstetrics and gynecology and pediatrics. Students participate in six weeks of OB/Gyn and six weeks of...
OBGY 107, Maternal Fetal Medicine Subinternship  The Maternal Fetal Medicine division 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 an evidence-based case review to members of the MFM division. Prerequisite: core Ob/Gyn clerkship. Students are expected to work two weekend days of their choice. One student every four weeks. Director: F. Galerneau

OBGY 108, Reproductive Endocrinology and Infertility Subinternship  The Reproductive Endocrine and Infertility (REI) division offers a four-week elective for fourth- and fifth-year students. In addition to gaining knowledge of human reproductive endocrine function, students are introduced to disruptions in physiology and function, which can lead to endocrinological 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. Recommended text: Clinical Gynecological Endocrinology & Infertility (Speroff). Prerequisite: core Ob/Gyn clerkship. One student every four weeks. Director: P.H. Kodaman

OBGY 109, Gynecologic Oncology Subinternship  The purpose of the gynecologic oncology subinternship is to enhance the student’s knowledge of the diagnosis and management of women with 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 subinternship period. In addition to operating room exposure, extensive experience is gained in the postoperative management of these patients. In the ambulatory setting, the student is exposed to the outpatient management of cancer, chemotherapy, and colposcopy. On a weekly basis, the student also attends divisional teaching sessions and the multidisciplinary tumor conference.
There is no night call. The recommended text is *Clinical Gynecologic Oncology* (DiSaia). Prerequisite: core Ob/Gyn clerkship. One student every four weeks. Director: E. Ratner

**OBGY 112, Family Planning Elective** This two- or four-week elective provides hands-on experience in family planning in diverse clinical settings. 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 (abortion, adoption, parenthood). Contraceptive counseling and care include insertion of long-acting reversible contraceptive methods (LARC, IUDs, and implants). In addition, the student participates in first-trimester ultrasound, medical and surgical abortions, medical and surgical management of early pregnancy failures, and intrauterine fetal demise. Clinical settings include outpatient visits and operating room experience at Yale New Haven Hospital and Planned Parenthood in New Haven. Prerequisite: core Ob/Gyn clerkship. One student every two or four weeks. Director: N.L. Stanwood; A. Gariepy, S.M. Richman

**OBGY 203, Urogynecology and Reconstructive Pelvic Surgery Service Subinternship** Offered by the Section of Urogynecology and Reconstructive Pelvic Surgery. Students are taught about the normal and abnormal physiology and function of the female pelvic floor and are introduced to the diagnosis and management of female pelvic floor disorders, namely lower urinary tract disorders, pelvic organ prolapse, and defecatory disorders. Common problems encountered by urogynecologists include urinary incontinence, recurrent urinary tract infections, cystocele, rectocele, uterine prolapse, vaginal vault prolapse after hysterectomy, microscopic hematuria, dyspareunia, interstitial cystitis, anal incontinence, and constipation. Exposure to advanced pelvic floor reconstructive surgery is also integrated into this elective. In addition to clinical activities in the office and the hospital, students have the opportunity to attend section didactics. Evaluation is based on clinical performance in the office and the operating room, participation in didactics, and an evidence-based presentation on a urogynecology topic of interest. Prerequisite: core Ob/Gyn clerkship. One student every four weeks. Director: O. Harmanli
OPHTHALMOLOGY AND VISUAL SCIENCE

40 Temple Street, 3rd floor, 203.785.2020
http://medicine.yale.edu/eyes

Professors  R.A. Adelman, M. Coca-Prados (Emeritus), M.C. Crair (Neuroscience), N. Daw (Emeritus), L.V. Del Priore (Chair), C. Gonzalez (Emeritus), W.H. Miller (Emeritus), L.J. Rizzolo (Surgery), M.L. Sears (Emeritus), M. Shields (Emeritus), J.H. Sinard (Pathology), V. Vasilou (Public Health), C.J. Zeiss (Comparative Medicine), D. Zenisek (Cellular & Molecular Physiology), Z. Zhou

Associate Professors  J.B. Demb, J.J. Hoh (Public Health), I. Kim, K.M. Stoessel, C. Teng


Instructors  A. Distefano, A.A. Kohli, F. Makkouk, O. Shakir, A. Shue

Research Scientist  H.H. Cai

Associate Research Scientists  M. Chen, J. Gong, S. Lee, J. Park

Clinical Professor  D.E. Silverstone

Associate Clinical Professors  B.M. DeBroff, P. Gaudio, A.D. Rose, G. Shafranov, C.A. Sklar


OPHT 120, Ophthalmology and Visual Science Clinical Elective  This intensive two- or four-week elective consists of ten half-day sessions per week. Students observe in specialty clinics and ophthalmic surgery. More advanced students evaluate patients in a general ophthalmology clinic. Students are expected to participate in departmental conferences and review independent study material provided by the department. Subspecialty experience includes cornea and external eye disease, glaucoma, neuro-ophthalmology, oculoplastics, retinal disease, and strabismus. By the end of the elective, students should be able to recognize the four most common causes of profound blindness and be able to identify vision-threatening and non-vision-threatening causes of a red eye; perform an external eye exam; use an ophthalmoscope to identify the optic nerve and be able to describe it; and have some familiarity with the slit lamp. Students who do the four-week elective are expected to do a presentation on a topic in ophthalmology at the end of the rotation. Evaluation is based on clinic performance, the case discussions, and the presentation. Teaching settings include the Yale Eye Center; the Yale Health Center;
the Eye Clinic at the West Haven VA Medical Center; and the Cornell Scott-Hill Health Center. Prerequisite: second-year ophthalmology module or equivalent. Maximum of three students every two or four weeks. Directors: S.H. Forster, N.E. Kombo
ORTHOPAEDICS AND REHABILITATION

YPB 133, 203.785.2579
http://medicine.yale.edu/ortho


Senior Research Scientists  P. Jokl, K.J. Keggi

Associate Research Scientist  J. Back

Assistant Clinical Professors  D.H. Gibson, G.A. Gorecki, D.C. Novicki, M.M. Pressman, J. Sumner

Clinical Instructors  E.J. Carlson, P.M. Marriott

Lecturers  L.R. Brenner, M.J. Parisi, B.T. Zazulak

ORTH 104, Orthopaedics and Rehabilitation Subinternship  Limited to third, fourth, and fifth clinical years. Students are active members of one of seven orthopaedic teaching teams: Adult Reconstruction and Orthopaedic Oncology, Orthopaedic Trauma and Fracture Care, Pediatric Orthopaedics, Spine Surgery, Hand and Upper Extremity Surgery, Sports Medicine and Arthroscopic Surgery, and Foot and Ankle Surgery. Students assist in the management of orthopaedic inpatients and receive operating room experience in both the inpatient and outpatient settings. Participation in the orthopaedic outpatient clinics provides experience in the evaluation and treatment of common musculoskeletal conditions. It is recommended that students take call with the orthopaedic resident in the emergency room to gain insight into the principles of acute fracture management. Clinic and operating room experiences are supplemented by weekly subspecialty conferences and the residents’ education program. Maximum of five students every four weeks. Director: M.P. Leslie

ORTH 3161, Physical Medicine and Rehabilitation Introduction  This two-week elective provides the fourth-year student with exposure to the specialty of PM&R under the direction of attending physiatrists. Students gain clinical experience and participate in the evaluation and rehabilitation management of patients with various disabling conditions such as stroke, acquired brain injury, amputation, multiple trauma, arthroplasty, acute
and chronic musculoskeletal conditions, and spinal cord injury. In addition to management of the medical care of patients with disabilities, students gain an understanding of the rehabilitation team approach, which is an integral part of the overall management of such patients. Students also have the opportunity to participate in the management of patients with acute and chronic pain. Management of a patient’s care through interaction with other health professionals such as neurologists, orthopaedic surgeons, psychiatrists, social workers, occupational therapists, speech and language pathology therapists, and physical therapists is an integral part of the elective. Students participate in the interdisciplinary rehabilitation team meetings held regularly in the inpatient rehabilitation setting and are exposed to the treatment modalities and therapeutic and diagnostic interventions performed by physiatrists. These interventions can include, but are not limited to, therapeutic exercise, therapeutic modalities (heat, cold, functional electrical stimulation, biofeedback), intrathecal baclofen, and therapeutic injection procedures such as interventional spine injections, corticosteroid joint injections, and botulinum toxin injections. Students may also be exposed to diagnostic tools such as electro diagnostic testing (electromyography or EMG and nerve conduction studies) and musculoskeletal ultrasound. Learning to take a comprehensive rehabilitation history and performing complete musculoskeletal and functional examinations are emphasized. Students also have the opportunity to observe their assigned patients during the patient’s course of rehabilitation therapies. Clinical settings may include inpatient consultations in Yale New Haven Hospital (both York Street and St. Raphael campuses); outpatient consultations at the YNHH Center for Musculoskeletal Care in Stamford, Old Saybrook, and/or North Haven; outpatient consultations with the Physiatry group at the West Haven VA Medical Center; and inpatient rehabilitation care of patients admitted to the YNHH inpatient rehabilitation unit (IRU) at the Rehabilitation and Wellness Center located within Milford Hospital. One student every two weeks. Director: M.L. Rosen
PATHOLOGY

BML 140, 203.785.3624
http://medicine.yale.edu/pathology


Instructors  A. Darbinyan, M. Much, S. Perincheri, O. Snir

Senior Research Scientists  Y. Choi, M. Kashgarian, J.H. Kim, J.A. Madri, A.B. West

Research Scientists  Y. Bai, P. Gershkovich


Associate Clinical Professor  I. Nash (Laboratory Medicine)

Clinical Instructor  N. Rodic

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 neoplasia and special organs and
systems. Correlation of the clinical and anatomical manifestations is emphasized. R.J. Homer and staff

**PATH 616, Autopsy Pathology** This course provides participation in the autopsy service with house staff in pathology. It covers proper performance of the autopsy including dissection, documentation and reporting, presentation of autopsy findings, and communication of medical opinions formed from the autopsy. The work includes involvement in dissection of cases, review of gross pathology, submission of sections for histology, review of microscopic slides, preparation of reports of findings, and involvement in investigative procedures related to necropsy material. Opportunities exist for correlation studies with previous biopsies and for clinical investigative and cell biologic techniques in relation to necropsy material and attendance. Six weeks minimum, enrollment limited to two students.

**PATH 617, Anatomic Pathology** The department offers an elective to medical students in the third or fourth year that provides a broad experience in general diagnostic techniques. Students have opportunities to participate in autopsy pathology, cytopathology, and surgical pathology. A daily diagnostic conference is scheduled for both residents and students. In addition to direct responsibilities in autopsy and surgical pathology areas, the student has opportunities to participate in electron microscopy, immunohistochemistry, molecular diagnostics, and flow cytometry techniques. One or two students every two or four weeks. Director: A. Adeniran

**PATH 619/LMED 619, Anatomic Pathology and Laboratory Medicine Combined Elective** The goals for anatomic pathology are to understand the basic principles of diagnostic anatomic pathology and its role in clinical medicine. The goals for laboratory medicine 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 and/or pathology, and for all students who will use laboratory and pathology tests in their careers. One or two students every four weeks. Director: A. Adeniran

**PATH 620a, 621b, 622b, Laboratory Rotations in Experimental Pathology** Laboratory rotations for first-year graduate students.

[**PATH 630b/ENAS 535b, Biomaterial-Tissue Interactions** The course addresses the interactions between tissues and biomaterials, with an emphasis on the importance of molecular- and cellular-level events in dictating the performance and longevity of clinically relevant devices. In addition, specific areas such as biomaterials for tissue engineering and the importance of stem/progenitor cells, and biomaterial-mediated gene and drug delivery are addressed.]

**PATH 640a/B&BS 640a, Developing and Writing a Scientific Research Proposal** The course covers the intricacies of scientific writing and guides students in the development of a scientific research proposal on the topic of their research. All elements of an NIH fellowship application are covered, and eligible students submit their applications for funding. Enrollment limited to twelve. K. Politi
[**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 instructor.]

**PATH 660b/C&MP 650b/PHAR 580b, The Responsible Conduct of Research**  Organized to foster discussion, the course is taught by faculty in the Pharmacology, Pathology, and Physiology departments and two or three senior graduate students. Each session is based on case studies from primary literature, reviews, and two texts: Francis Macrina’s *Scientific Integrity* and Kathy Barker’s *At the Bench*. Each week, students are required to submit a reaction paper discussing the reading assignment. Students take turns leading the class discussion; a final short paper on a hot topic in bioethics is required. B.E. Ehrlich

[**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.]

**PATH 680a/C&MP 630a/PHAR 502a, Seminar in Molecular Medicine, Pharmacology, and Physiology**  Readings and discussion on a diverse range of current topics in molecular medicine, pharmacology, and physiology. The class emphasizes analysis of primary research literature and development of presentation and writing skills. Contemporary articles are assigned on a related topic every week, and a student leads discussions with input from faculty who are experts in the topic area. The overall goal is to cover a specific topic of medical relevance (e.g., cancer, neurodegeneration) from the perspective of three primary disciplines (i.e., physiology: normal function; pathology: abnormal function; and pharmacology: intervention). D. Nguyen

**PATH 681a/B&BS 681a, Advanced Topics in Cancer Biology**  This advanced course focuses on readings and discussion on three or four major topics in cancer biology, such as targeted therapy, tumor immunology, tumor metabolism, and genomic evolution of cancer. For each topic, the class starts with an interactive lecture, followed by critical analysis of primary research literature. Recent research articles are assigned, and a student leads discussions with input from faculty who are experts in the topic area. Prerequisite: PATH 650b or permission of the instructor. Open to all Ph.D., M.D./Ph.D., and M.P.H. students and to advanced undergraduates at the discretion of the instructor. R. Jensen

**PATH 690b, Molecular Mechanisms of Disease**  The course links the experimental and basic molecular mechanisms of cellular and organ functions to the pathogenesis of the most common human diseases. It addresses the molecular basis of viral infections and AIDS, inflammatory and immune-mediated diseases, and several hematologic disorders. The course is coordinated with the Department of Genetics to provide students with a comprehensive, in-depth perspective on the significance and impact of genetic mechanisms in human diseases. In addition to formal lectures, the course offers monthly journal clubs and a special seminar given by a prominent guest speaker.
PEDiATRICS

LMP 4085, 203.785.4638
http://medicine.yale.edu/pediatrics


Research Scientists  E. Drye, W. Ji, J.M. McGrath (Genetics)
MD 2175 (PEDS)/MD 2150 (OBGY), Women and Children’s Health Clerkship This twelve-week integrated clerkship includes clinical components in obstetrics and gynecology and pediatrics. Students participate in six weeks of OB/Gyn and six weeks of pediatrics, with a mix of inpatient and ambulatory clinical experiences in both specialties. Throughout the clerkship students participate in integrated experiences that cover themes such as health and development, preventive care, sexual health, families and communities, health promotion and disease prevention, and perinatal care. All students attend an evening session with the gynecologic teaching associates. Directors: D.C. Hersh, S.R. Pathy; Codirectors: V.B. Desai, C. Boeras

PEDS 128, Pediatric Hematology/Oncology Elective This elective provides broad experience in the diagnosis and management of pediatric malignancies and hematologic disorders of infancy and childhood. The student functions as part of the inpatient service team and participates in the outpatient clinic three to four mornings each week. Weekly conferences include the multidisciplinary pediatric tumor board, leukemia and lymphoma conference, section conference, and weekly pediatric hematology/oncology patient management rounds. One student every two or four weeks. Prerequisite: Pediatric clerkship. Director: S. Massaro

PEDS 143/SURG 176, Pediatric Surgery Subinternship This subinternship provides an in-depth exposure to the broad spectrum of pediatric surgical problems. Specific attention is given to identifying the pediatric patient in crisis, a relevant skill whether or not the student pursues a career in surgery. Objectives include understanding the correction of major congenital anomalies, management of trauma, care of the critically ill child, and management of solid tumors. Experience includes in-depth exposure to the pediatric operating room, training in neonatal and pediatric critical care, and experience
in the pediatric surgical outpatient clinic. The student is an integral part of the pediatric surgical team. Prerequisite: completion of third-year clerkships. One student every four weeks. Director: E.R. Christison-Lagay

**PEDS 144, Pediatric Cardiology Elective** Students are exposed to a broad array of congenital and acquired heart disease in pediatrics, ranging from fetal to adult congenital heart patients. Over the course of the elective, students develop a basic understanding of the physiology of normal circulation, as well as the pathophysiology, diagnostic tests, and management of common forms of congenital and acquired heart disease. Students are exposed to patients over a broad range of settings, from daily inpatient rounds to outpatient continuity clinics. Additionally, there may be opportunities to observe complex diagnostic and therapeutic management options, including advanced cardiac imaging, cardiac catheterization, and surgical repair of pediatric heart defects. One student every four weeks. Director: R.W. Elder

**PEDS 146, Pediatric Infectious Disease Elective** Students participate in pediatric infectious disease rounds by presenting the case study of an inpatient whom they have examined to a group of faculty and fellows. Emphasis is placed on the correlation of the clinical problem and its practical management with principles of infectious epidemiology and clinical microbiology (bacteriology and virology). Consulting rounds are held daily. Teaching rounds in diagnostic microbiology are held four times a week. Weekly divisional rounds last approximately two hours. Students also attend the pediatric AIDS clinic. Prerequisite: Pediatric clerkship or permission of the instructor. Open to fourth- and fifth-year students only. One student every four weeks. Director: C. Hansen

**PEDS 148, Pediatric Endocrinology and Diabetes Elective** This four-week elective provides extensive exposure to various aspects of pediatric endocrinology, with an emphasis on disorders of growth and sexual development, thyroid function, diabetes (type 1 and type 2), obesity, and bone and mineral metabolism. The student participates primarily in the outpatient pediatric endocrinology and diabetes clinics, as well as the inpatient service. The rotation includes participation in weekly pediatric endocrinology conferences as well as conferences held jointly with the adult endocrinology service. One or two students every four weeks. Director: A.D. Patel; S.A. Weinzimer

**PEDS 152, Pediatrics Subinternship** A four-week inpatient rotation during which senior medical students are considered the equivalent of interns and are directly responsible for the care of assigned patients under the supervision of resident and attending physicians. Students are assigned to one of the three patient-care units at Yale New Haven Children’s Hospital. The rotation offers an opportunity to develop organizational skills and experience the pace of internship in a supportive environment. Emphasis is placed on being a good team member, taking ownership of one’s patients, and demonstrating improvement in intern skills (clinical reasoning, communication with patients/families, organization, prioritization, presentation, and efficiency) through incorporation of constructive feedback. Prerequisite: satisfactory completion of third-year Pediatric and Internal Medicine clerkships. Maximum of three students every four weeks. Directors: D.C. Hersh
**PEDS 154, Pediatric Respiratory Pulmonary Elective**  Students are exposed to a wide variety of activities in the Section of Pediatric Respiratory Medicine. These include evaluation and treatment of infants and children with acute and chronic respiratory diseases such as asthma, cystic fibrosis, bronchopulmonary dysplasia, bronchiolitis, pneumonia, aspiration syndromes, and obstructive sleep disorders. The emphasis is on learning how to assess respiratory dysfunction by physical exam and laboratory testing. The basics of mechanical ventilation are reviewed. Students rotate through inpatient and various outpatient services and specialty clinics, Pulmonary Function Laboratory, Exercise Stress Testing Lab, and Pediatric Sleep Center. Students are expected to participate in seminars, journal club, and patient rounds and clinics. In addition, students have the opportunity to experience one of only two CF Centers in the state of Connecticut offering a multidisciplinary team approach that provides state-of-the-art care of CF patients. One student every two or four weeks. Director: A. Bazzy-Asaad

**PEDS 155/EMER 155, Pediatric Emergency Medicine Elective**  Fourth-year students have the opportunity to evaluate and manage a broad range of acute medical and surgical complaints while honing their clinical skills under direct attending supervision, including thirty-six clinical hours per week in the pediatric emergency department. Education during clinical shifts is augmented by pediatric emergency medicine fellow education conferences and one-on-one teaching sessions with the elective director. Participation in teaching conferences and mock codes is required. One student every four weeks; two- and three-week rotations considered upon request. Prerequisites: pediatric rotation, EPIC inpatient training, and EPIC ED e-learning. Director: P.L. Aronson

**PEDS 307, Pediatric Neonatal-Perinatal Medicine Elective (NNICU)**  Students spend two weeks on the step-down service, followed by two weeks on the intensive care service. On each service students attend medical rounds and follow neonatal patients and write progress notes under close supervision. Students attend delivery room resuscitations and stabilizations, and prenatal consultations. On both services, students attend general and student-oriented educational conferences as well as radiology rounds. Students also pursue independent study on topics in neonatology and make brief presentations to the clinical team. Additional opportunities, such as attendance at outpatient developmental follow-up exams, are available to students based on interest. One student every four weeks. Directors: C. Bruno, S.M. Peterec

**PEDS 314, Pediatric Critical Care Medicine Elective**  Senior medical students participate as members of the pediatric intensive care unit team. Students are directly responsible for the care of assigned patients under the supervision of pediatric residents, critical care fellows, and attending intensivists. A core curriculum composed of interactive talks on the major pediatric critical care topics is presented two to three times a week, as well as daily radiology rounds and a monthly morbidity and mortality conference. Open to fourth- and fifth-year students only. One student every four weeks. Director: K.G. Couloures

**PEDS 3181, Pediatric Neurology Elective**  This elective provides hands-on experience in pediatric neurology in both inpatient and outpatient clinical settings. Students attend rounds with supervising attending physicians as well as adult and pediatric neurology residents. Students are exposed to acute common as well as rare pediatric neurology
disorders such as epilepsy, headaches, mental status changes, and weakness. The students obtain histories and perform neurological examinations on newly admitted patients or consult patients. Bedside discussions regarding diagnosis, work-up, and treatment are encouraged. Students have the opportunity to participate in the pediatric neurology consultation service or outpatient clinics. The consultation service exposes students to various emergencies in pediatric neurology such as seizures, status epilepticus, stroke, and other acute neurological issues. Both general pediatric neurology as well as subspecialty clinics (such as epilepsy, headache, movement disorders, multiple sclerosis, neuromuscular, EMG) are available. In addition, students are introduced to different procedures, including spinal tap, electroencephalogram, brain and spine imaging techniques, and electromyogram. One student every two or four weeks. C. Ionita

**PEDS 3182, Pediatric Nephrology Elective** Students participate in the evaluation and management of patients on the pediatric inpatient service, pediatric ICU, neonatal ICU, and pediatric specialty center. Patient problems encompass the full range of clinical renal disorders, including fluid and electrolyte disturbances, acute and chronic renal failure, various forms of glomerulonephritis and interstitial nephritis, nephrolithiasis, hypertension, intoxications, inherited renal diseases, and urinary tract abnormalities. A pediatric nephrology faculty member serves as attending physician at all times and conducts teaching rounds daily. These teaching sessions provide supervision and training in the practical aspects of patient management, as well as instruction in the basic scientific disciplines that underlie the clinical practice of nephrology. Students also participate in outpatient renal clinics under the supervision of the faculty, gaining experience in the work-up of common renal disorders not initially requiring hospitalization (e.g., proteinuria, hematuria, mild azotemia), the assessment and treatment of childhood hypertension, and the long-term follow-up of patients after discharge from the inpatient and transplant services. Students are expected to attend weekly teaching conferences, formal pediatric renal core curriculum, and pediatric renal rounds. Open to fourth- and fifth-year students only. One student every two or four weeks. O. Couloures
PHARMACOLOGY

SHM B204, 203.785.4393
http://medicine.yale.edu/pharm


Associate Professors S. Akhtar (Anesthesiology), T.J. Boggon, D.A. Calderwood, J.N. Contessa (Therapeutic Radiology), M.P. DiGiovanna (Medicine), K.M. Ferguson, S. Ghosh (Neurology), Y. Ha, K.A. Martin (Medicine), E. Paintsil (Pediatrics), C.V. Rothlin (Immunobiology), B.E. Turk

Assistant Professors C. Alarcon, D. Klein, Y. Liu, B.P. Nelson, S. Nicoli (Genetics)

Senior Research Scientist S. Stayrook

Research Scientists A.B. Kiyatkin, S. Wu


PHAR 502a/C&MP 630a/PATH 680a, Seminar in Molecular Medicine, Pharmacology, and Physiology Readings and discussion on a diverse range of current topics in molecular medicine, pharmacology, and physiology. The class emphasizes analysis of primary research literature and development of presentation and writing skills. Contemporary articles are assigned on a related topic every week, and a student leads discussions with input from faculty who are experts in the topic area. The overall goal is to cover a specific topic of medical relevance (e.g., cancer, neurodegeneration) from the perspective of three primary disciplines (i.e., physiology: normal function; pathology: abnormal function; and pharmacology: intervention). D. Nguyen

PHAR 504a, Principles of Pharmacology This course covers the molecular mechanisms of therapeutics, which are presented in a conceptual framework to increase understanding but decrease memorization. Topics include (but are not limited to) receptor affinity, efficacy, multiple equilibria, pharmacokinetics, and toxicity; enzyme kinetics and inhibition, drug discovery and design; molecular basis of antimicrobial therapy, cardiology drugs, anticancer and antiviral therapies; and therapeutics for inflammatory disorders, asthma, and allergy. E. Lolis

PHAR 506a and b, Methods in Pharmacological Research (Rotations) Students work in laboratories of faculty of their choice. The schedule for each rotation is announced at the beginning of the fall term. E. Lolis
PHAR 521b/INP 521b, Neuroimaging in Neuropsychiatry II: Clinical Applications
Neuroimaging methodologies including Positron Emission Tomography (PET), Single Photon Emission Computed Tomography (SPECT), Magnetic Resonance Imaging (MRI), functional Magnetic Resonance Imaging (fMRI), and Magnetic Resonance Spectroscopy (MRS) 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 application of state-of-the-art neuroimaging methods to research in neurologic and psychiatric disorders. I. Esterlis

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.M. Bennett

PHAR 529b, Structural Biology and Drug Discovery
A comprehensive introduction to the concepts and practical uses of structural biology and structural biology-related techniques in drug discovery. The first half of the course focuses on techniques used to discover and optimize small and macromolecule drugs. Students are introduced to topics such as small molecule lead discovery, X-ray crystallography, cryo-electron microscopy, and biophysical techniques. The first half of the course also includes a practical component where students conduct hands-on structural biology experiments and learn about biophysical techniques in a laboratory setting. The second half of the course focuses on drug discovery, particularly for protein kinases. It includes a field trip to the Yale Center for Drug Discovery, where the students are introduced to the in-house Yale screening facilities for small molecule drug discovery. Two half-credit courses—PHAR 530 and PHAR 531—are also offered for the two halves of PHAR 529.
Y. Ha, T. Boggon

PHAR 530b, Targeted Use of Structural Biology in Drug Discovery
This 0.5-credit course, the second half of PHAR 529b, begins in February. 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. T. Boggon, Y. Ha

PHAR 531b, Concepts of Structural Pharmacology
This 0.5-credit course, the first half of PHAR 529b, introduces students to the concepts of structural biology and provides the background for how these concepts are applied to areas of great importance in pharmacology and how they facilitate drug development. T. Boggon, Y. Ha

PHAR 550a/C&MP 550a/ENAS 550a/MCDB 550a, 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. Graduate students evaluate research findings through literature review and weekly meetings with the instructor.

W.M. Saltzman, S. Campbell

**PHAR 560b/C&MP 560b/ENAS 570b/MCDB 560b, 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, bio-physical, 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. F.J. Sigworth

**PHAR 580b/C&MP 650b/PATH 660b, The Responsible Conduct of Research** Organized to foster discussion, the course is taught by faculty in the Pharmacology, Pathology, and Physiology departments and two or three senior graduate students. Each session is based on case studies from primary literature, reviews, and two texts: Francis Macrina’s *Scientific Integrity* and Kathy Barker’s *At the Bench*. Each week, students are required to submit a reaction paper discussing the reading assignment. Students take turns leading the class discussion; a final short paper on a hot topic in bioethics is required. B.E. Ehrlich
PSYCHIATRY
300 George Street, Suite 901, 203.785.2117
http://medicine.yale.edu/psychiatry


A. Westphal, I. Wiechers, P.D. Worhunsky, K. Xu, S. Yip, G. Yoon, S. Zhang, Z. Zimolo


Senior Research Scientists  K.L. Behar, M. Bell, J.D. Elsworth, P.I. Jatlow (Laboratory Medicine), R. Masheb, R.S. Schottenfeld, B.E. Wexler


Clinical Professors  D.N. Berg, J. Phillips, L.W. Reiser

Associate Clinical Professors  D. Fried, M. Mandelkern


Clinical Instructors  M. Bailey, V. Dubose, M. Ervin, D.J. Flanigan, C. Grazia, M.C. Grenough, C.M. Hunnicutt, R.L. Kieran, H. Kim, J.N. Rascati, J. Serra

MD 2075 (Psych)/MD 2050 (IM), Biopsychosocial Approach to the Patient Clerkship
This twelve-week integrated clerkship comprises a six-week rotation in primary care and a six-week rotation in psychiatry. During the six-week primary care component, students spend 5–6 half-days each week working in a practice for adult primary care (i.e., general internal medicine, family medicine, or combined medicine/pediatrics) and 2–3 half-days each week working in a practice for general pediatrics. The psychiatry component of the clerkship includes three weeks of inpatient psychiatry, three weeks of consultation-liaison or emergency psychiatry, and six half-day sessions in a longitudinal outpatient psychiatry or integrated primary care–psychiatry clinic. Primary care and psychiatry each have distinct classroom exercises. However, an integrated classroom curriculum brings students together each Thursday afternoon to explore the many topics that overlap primary care and psychiatry, including mood disorders, anxiety disorders, substance abuse, somatic symptom disorder, and pain. Directors: P. Ellis, K.M. Wilkins; Codirectors: A.M. Fenick, M. Goldenberg

Psych 203, Psychiatry Inpatient Elective (CMHC) This elective includes 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, administration) with CMHC faculty. Prerequisite: required Psychiatry clerkship. Open to fourth-year students only. One student every four weeks. Director: R.M. Rohrbaugh

Psych 206, Law and Psychiatry Elective 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. Prerequisite: required Psychiatry clerkship. One student every four weeks. Director: R.M. Rohrbaugh

Psych 209, Addiction Psychiatry Elective An elective clinical training experience in addiction psychiatry for third- and fourth-year students. The primary training site is the Detoxification and Addiction Stabilization Service at the VA Connecticut Healthcare System in West Haven. Students learn about performing detailed initial evaluations; treating alcohol, opioid, and benzodiazepine withdrawal; initiating medication-assisted treatment; providing opioid overdose education and naloxone distribution, providing
smoking cessation treatment, utilizing psychosocial interventions and mutual help, as well as the principles of harm reduction; and addressing psychiatric and medical comorbidities. The rotation includes a discussion of relevant readings. Prerequisite: required Psychiatry clerkship. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 210, Psychiatry Inpatient Elective (YNHH/YPH)** This elective includes 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 student 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 the Yale New Haven Psychiatric Hospital; clinical research and outpatient involvement may be options. Prerequisite: required Psychiatry clerkship. Open to fourth-year students only. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 211, Clinical Neuroscience Research Unit Elective** This elective 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, substance abuse, and psychiatric genetics. Prerequisite: required Psychiatry clerkship. Open to fourth-year students only. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 212, Mood Disorders and Neuromodulation Elective (ECT and TMS)** This elective offers senior medical students the opportunity to learn about neuromodulation techniques in the treatment of mood disorders, more specifically, by using electroconvulsive therapy (ECT) and repetitive transcranial stimulation (TMS). Students learn the theoretical basis for the use of ECT and TMS, among other neuromodulation techniques, in the treatment of mood disorders. They learn indications and contraindications to treatment, the process of evaluation of patients prior to and during treatment (including use of standardized depression rating scales), how to monitor for complications and side effects to treatment, and the latest research in the field. Students work closely with psychiatry attending physicians and residents at the VA in the evaluation of patients referred for ECT and TMS, and have the opportunity for supervised participation in the performance of these treatments. Patient population includes veterans of all ages with a variety of psychiatric conditions, including mood disorders with comorbid anxiety and substance use disorders. Prerequisite: required Psychiatry clerkship. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 234, Adolescent Psychiatry Elective** 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 patients aged 12–18. 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 conferences. Prerequisite: required Psychiatry clerkship. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 238, Early Psychosis Elective (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. Students 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. Students 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. STEP is designed as a service delivery model with a built-in observational cohort and experimental pragmatic randomized controlled trial. Students 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. This experience must be paired with a main placement at one of the available elective inpatient services. Prerequisite: required Psychiatry clerkship. Open to fourth-year students only. One student every four weeks. Director: R.M. Rohrbaugh

**Psych 301, Psychiatry Inpatient Subinternship (CMHC)**  Intensive work with inpatients who suffer from major psychiatric disorders with or without substance abuse and who have significant social challenges often including lack of access to stable housing, work, and health insurance. Emphasis is on assessment, acute treatment, and arrangement of continuing care in the community. The student functions as an integral member of a multidisciplinary treatment team and serves as the primary clinician for four to five patients. The subinternship occurs on the inpatient service (4th floor) of the Connecticut Mental Health Center (CMHC). Prerequisite: required Psychiatry clerkship. Open to fourth- and fifth-year students only. One student every four weeks, May through October only. Director: R.M. Rohrbaugh
Psych 302, Psychiatry Inpatient Subinternship (YNHH, WS-2)  Intensive work with patients who suffer from major psychiatric disorders and range in age from college students to middle age. Most patients have access to health insurance or have Medicare and/or Title XIX. Emphasis is on assessment, acute treatment, and arrangement of post-discharge follow-up care in the community. The student 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 subinternship occurs on the general adult inpatient service at the Yale New Haven Psychiatric Hospital. Prerequisite: required Psychiatry clerkship. Open to fourth- and fifth-year students only. One student every four weeks, May through October only. Director: R.M. Rohrbaugh

Psych 303, Clinical Neuroscience Research Unit Subinternship (CNRU)  The Clinical Neuroscience Research Unit (CNRU) is a specialized service dedicated to the diagnosis, treatment, and research of neuropsychiatric disorders. The unit consists of an inpatient service, as well as outpatient specialty clinics for addictive, depressive, obsessive-compulsive, psychotic, and women’s behavioral health disorders. Most patients voluntarily participate in clinical research studies designed to determine the neurobiological mechanism underlying these disorders. Pharmacotherapy, individual psychotherapy, group therapy, and behavior therapy are provided as clinically indicated and are free of charge to patients. Students function as high-level clinical care providers and are an integral part of the treatment team. The subinternship occurs on the CNRU of the Connecticut Mental Health Center. Prerequisite: required Psychiatry clerkship. Open to fourth- and fifth-year students only. Director: R.M. Rohrbaugh

Psych 320/CHLD 302, Child Study Center Clinical Research Elective  This elective entails etiology, clinical manifestations, and treatment of adolescent psychopathology, including eating disorders, depression, suicide, psychosis, delinquency, and the impact of physical and mental disabilities on adolescent development. Reading is supplemented with live and taped clinical material. One student every four weeks. Director: R.M. Rohrbaugh

Psych 325/CHLD 325, Child Study Center Psychiatry Elective  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. Students are active team members of the Children’s Psychiatric Inpatient Service (CPIS) and the consultation service to the pediatric wards of Yale New Haven Hospital and can take 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 practicals selected by the student following consultation with the director of medical studies and the Child Study Center. One student every four weeks. Director: R.M. Rohrbaugh

Psych 3192, Psychiatric Emergency Room Elective, VA Connecticut Healthcare System  This two-week elective experience exposes students to the management of complex and high-risk veterans who present to the psychiatric emergency room (PER). Students
learn basic skills in obtaining a thorough history, including the difficult topics of suicidality, homicidality, substance use, and homelessness. Students learn basic skills in crisis management, acute substance intoxication and withdrawal, and comprehensive risk assessments. Students function within the larger team of professionals and learn the importance of a team-based approach to patient care. Prerequisite: completion of the pre-clinical medical school curriculum and the core clinical clerkships. One student every two weeks. Director: R.M. Rohrbaugh

**Psych 3194, Psychological Medicine Elective** In this elective, post-clerkship students are exposed to a variety of patients with psychiatric symptoms who are hospitalized in the general hospital and/or present to outpatient medical clinics. The students are assigned to either the Behavioral Intervention Team (BIT), a multidisciplinary team that works proactively providing timely, appropriate, and effective patient care in the internal medicine floors, or the Psychiatric Consultation/Liaison Service, which provides psychiatric consultation in the different specialty sites including ICU, surgery, OBGYN, and neurology. Students also spend time in an outpatient experience in the Nathan Smith Clinic, where their clinical learning focuses on HIV psychiatry and addictive disorders. During this clinical elective, students enhance their interview skills, learn the process of consultation/liaison in the different treatment settings, and enhance their core psychiatric knowledge and skills with a focus on content at the interface of medicine and psychiatry. They participate in teaching sessions provided by the attendings and fellows and are expected to attend the service’s clinical conferences and to present cases in morning rounds. Prerequisite: required Psychiatry clerkship. One student every four weeks. Director: T. Matos Santana

**Psych 7076, Psychiatric Emergency Room Subinternship (VACHS)** Students build skills and have an increasing level of responsibility for direct patient care. Students take a primary role in caring for patients, with direct supervision from chief residents and attending physicians; and they act as role models and mentors for MS3 students who will be rotating simultaneously. By the end of the rotation, students should be confident with supervised but independent management of complex psychiatric patients. Prerequisite: completion of the preclinical medical school curriculum and the core clinical clerkships. One student every four weeks. Director: R.M. Rohrbaugh
PUBLIC HEALTH

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Senior Research Scientists  M. Bracken, B. Cartmel, J.E. Childs, L. Curry, A.J. Davidoff, G.H. Friedland (Medicine), J.F. Gent, R. Gueorguieva, P.J. Krause, L.E. Munstermann


Clinical Professors  J.F. Anderson, R. Hecht

Associate Clinical Professor  D. Shenson

Assistant Clinical Professors  S.D. Geballe, A.M. Miller, C. Yeckel

Clinical Instructor  D.L. Humphries


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RADIOLOGY AND BIOMEDICAL IMAGING

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Instructors  A. Boustani, M. Conti, P. DiDomenico, I. Ikuta, S. Marlatt

Research Scientists  F. D’Errico, N. Nabulsi


Clinical Professor  M.S. Shin

Associate Clinical Professors  T.R. McCauley, A. Mustafa

Assistant Clinical Professors  G.J. Conlogue, J. Kim, M. Rolen

DIAG 121, Diagnostic Radiology Clinical Elective  This elective introduces students to the basic principles of radiologic imaging and interpretation necessary for clinical management. Students rotate through one-week blocks on the Chest, Musculoskeletal (MSK), and GI/GU services as well as the radiology section of the Emergency
Department (ED), with the goal of learning the fundamentals of interpreting plain films. The emphasis on the Chest service is the interpretation of plain films seen in the ICU and imaging related to acute and chronic chest pathology. On the MSK service, emphasis is on interpretation of fractures, plain film findings of bone disease, and postoperative imaging. On the GI/GU service, students observe and participate in fluoroscopic gastrointestinal studies and their interpretation. The ED rotation exposes students to the wide array of imaging performed through the ED including trauma. Students are also exposed to more advanced imaging modalities (CT, ultrasound, and MRI). Students are paired with a dedicated resident on their weekly rotations and also participate in readouts with attending radiologists. Students are taught relevant radiologic anatomy and the appropriateness of ordering various studies in the diagnosis of disease; they are also exposed to what the performance of various studies entails. Students may tailor the rotations to specific interests within radiology (e.g., ultrasound, mammography, interventional radiology, neuroradiology, nuclear medicine). Students attend the twice daily departmental resident lectures and weekly medical student radiologic lectures, as well as at least two core introductory lectures in each subspecialty. Self-teaching material is available online, and students are expected to review this during each of their weeks. There are no call responsibilities, although students have the option of participating in evening shifts in the ED to gain more experience and broader exposure to this busy service. At the conclusion of the elective, each student gives a short presentation of an interesting case with discussion of relevant imaging. Maximum of six students every four weeks. Director: J.D. Kirsch; Associate Director: J. Killam

**DIAG 134, Vascular and Interventional Radiology Elective** This two-week elective is 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), 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 tract pathology, drainage of abscesses and other fluid collections, and tumor ablation. Students participate in the interventional radiology clinic and admitting service. One student every two weeks. Director: I. Latich

**DIAG 135, Pediatric Imaging Clinical Elective** This elective serves as an introduction to the clinical management of infants, children, and adolescents through the use of integrated diagnostic imaging. Students participate through a review of imaging studies with residents and attending physicians; observation of fluoroscopic, ultrasound, and computed tomography (CT) procedures; and attendance at daily clinical conferences. Students are encouraged to present interesting cases or to participate in research projects during the elective. One or two students every two or four weeks. Director: L. Ehrlich

**DIAG 137, Neuroradiology Elective** 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. This elective is somewhat
different from others in that there is less “hands-on” activity and more observation, and it tends to be more self-motivated and self-directed. Students are encouraged and expected to interact during readouts by asking questions and being involved. They are also encouraged to review cases on their own prior to readout. By the end of the elective, students should be familiar with the normal radiographic anatomy of the brain, spine, and head and neck, and they should have developed a systematic approach to interpreting CTs and MRIs of this region as well as recognizing basic pathology. Students are also exposed to the various subsections of neuroradiology including brain, spine, head and neck, pediatrics, etc. Upon request, those interested may also be exposed to special procedures including image-guided biopsies, myelography, angiography, and neurointerventional procedures. An interactive PowerPoint program covering neuroradiology is provided, and there are also teaching aids on the neuroradiology website. A number of teaching conferences are offered. One or two students every two or four weeks. Director: A. Mahajan

**DIAG 138, Interventional Radiology Subinternship** This subinternship is designed for students interested in pursuing a career in interventional radiology, but also for those interested in diagnostic radiology, surgical specialties, and other fields that interact intimately with interventional radiology such as urology, transplant surgery, oncology, and hepatology, among many others. Students participate in a wide spectrum of interventional procedures, which include body systems spanning human anatomy from head to toe. In the vascular system, these include arterial and venous angiography, angioplasty, thrombolysis, and stenting; embolization for bleeding; tumor treatments (chemoembolizations, radioembolizations); vascular malformation and venous reflux management; inferior vena cava filter placement and retrieval; management of portal hypertension (TIPS, BRTO); and hemodialysis access management and placement of a variety of venous access devices, such as ports, hemodialysis, and medication infusion catheters. Nonvascular procedures include image-guided biopsy and tumor ablation; percutaneous approaches to gastric, biliary, and urinary track pathology; and drainage of abscesses and other fluid collections. In addition to engaging actively in procedures, students participate in the pre- and postprocedural evaluation of patients in the clinic setting, engage in the postprocedural care of admitted patients, and rotate on the interventional radiology consult service, at times carrying the IR consult pager. Educational components include weekly IR lectures, weekly peripheral vascular multidisciplinary conferences, and weekly liver tumor board meetings. Students are expected to take approximately one weeknight call per week and one weekend call during the rotation. Prerequisite: completion of all required clerkships. One or two students every four weeks. Director: I. Latich
SURGERY

FMB 102, 203.785.2697
http://surgery.yale.edu


**Instructors**  D. Friedman, R. Sawh-Martinez

**Senior Research Scientist**  R. Korah

**Research Scientists**  A. Ivanova, L. Qin

**Associate Research Scientists**  M. Camarata, B.C. Dash, V. Gunasekharan, N. Hasan, H. Hu, T. Isaji, S. Ono, A.A. Surguevich, D.P. Vangeli, T. Wang, B. Yatsula, B. Ziganshin

**Clinical Professors**  J.E. Fenn, R.S. Stahl

**Assistant Clinical Professor**  M.K. O’Brien

MD 2100 (SURG)/MD 2125 (EMER), Surgical Approach to the Patient Clerkship  This twelve-week integrated clerkship includes surgery (six weeks, general; three weeks, specialties) and emergency medicine (three weeks) clinical components. Throughout the clerkship students participate in integrated experiences that address themes of the OR experience such as perioperative care, emergency/trauma management, procedures, medical error and patient safety, and anesthesiology. Students also participate in a twelve-week mentoring program during the clerkship. Directors: J. Bod, F. Liu; Codirectors: K. Pei, D. Stitelman

SURG 129, Cardiac Transplantation/Cardiac Assist Device Elective  Intensive exposure to laboratory and clinical aspects of cardiac transplantation. Special emphasis is placed on the relationship between ongoing laboratory studies and clinical practice in this field. Students are involved in the preoperative assessment of prospective transplant candidates, donor procurement, intraoperative management, and postoperative immunosuppression. Open to fourth- and fifth-year students only. One student every four weeks. Director: A. Mangi; Associate Director: P. Bonde

SURG 130, Cardiac Surgery Subinternship  Intensive exposure to preoperative and postoperative management of adult and pediatric cardiac 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 cardiac surgery with members of the faculty and may be required to present a seminar on a subject in cardiac surgery to faculty and resident staff. Prerequisite: completion of third-year clerkships. Maximum of four students every four weeks. Director: J.A. Elefteriades

SURG 131, Thoracic Surgery Subinternship  The student is expected to be a valuable contributing team member during daily rounds, in the operating room, in the outpatient clinics, and at conferences. The majority of patients under the care of the thoracic surgery service include those with lung, esophageal, and mediastinal malignancies and infections, and many present both diagnostic and therapeutic challenges. Students have the opportunity to understand the multidisciplinary approach toward the management of these complex patients. Interested students can also pursue clinical research projects and papers. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One or two students every four weeks. Director: J. Blasberg

SURG 143, Surgical Critical Care Elective (YNHH)  The surgical intensive care unit exposes the senior medical student to the day-to-day and minute-to-minute management of the critically ill surgical patient. The breadth of surgical disease, spanning all aspects of surgery, allows the student to understand the management of respiratory, cardiovascular, gastrointestinal, and renal failure. Advanced techniques in ventilatory management and state-of-the-art sepsis management are used. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One student every four weeks. Director: L.L. Maerz

SURG 144, Trauma and Emergency General Surgery Subinternship  A four-week exposure to the urgent surgical care of the critically ill and injured patient including those with penetrating and blunt injuries, surgical emergencies including mesenteric ischemia,
bowel perforation, abdominal sepsis, necrotizing soft-tissue infections, and other urgent surgical conditions. Students are exposed to the evaluation, medical, and surgical management of patients with traumatic and surgical emergencies in the emergency department, surgical floors, operating rooms, and outpatient clinics; and they assume supervised primary responsibility for these patients throughout their pre-, intra- and postoperative courses. Options for involvement in clinical research projects are also available. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One or two students every four weeks. Director: F.Y. Lui

SURG 150, Plastic and Reconstructive Surgery Subinternship  Students participate in the evaluation and reconstructive surgery of deformities of congenital, traumatic, and neoplastic origin. Students are exposed to patients in inpatient and outpatient settings as well as operating room experiences, supplemented by regular conferences. Prerequisite: completion of third-year clerkships. One or two students every four weeks. Director: M. Alperovich

SURG 151, Colorectal Surgery Subinternship  Students learn about the surgical care of colon and anorectal diseases, including infectious, inflammatory, neoplastic, and mechanical pathologic processes. Students assist in the evaluation, management, and care of patients with colorectal and anorectal disease in the hospital ward, emergency room, operating room, and clinic. There is routine use of endoscopy and laparoscopy. Students may also participate in a precepted experience, with increased responsibility for patient care on the hospital ward, acting as the intern for select weekends. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One student every four weeks. Director: H. Einarsdottir

SURG 153, Otolaryngology Subinternship  This clinical experience is independent of the Otolaryngology elective and takes place on an individual basis. It includes operating room experience, ward responsibilities, involvement in outpatient clinics, and conferences, didactics, and tumor board. The rotation is divided into two-week blocks, including the head and neck service (H&N cancer/reconstructive surgery, laryngology) and the ENT specialty service (neurotology, pediatrics, sinus/skull base, facial plastics, general). Students improve their suturing skills and become comfortable performing a thorough but efficient head and neck examination and interpreting diagnostic tests and procedures that can be useful in all medical and surgical subspecialties. At the end of the rotation, students are expected to give a seven-minute presentation on a topic of their choice at ENT grand rounds. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One or two students every four weeks. Director: S. Mehra

SURG 159, Urology Subinternship  Flexible program designed to provide in-depth exposure to urology specialty areas, including uro-oncology, minimally invasive (laparoscopic) urology, endo-urology, neuro-urology, female urology, and pediatric urology. Students are part of the urologic team and participate actively in the clinic, the operating room, and on rounds. Prerequisite: at least six months of prior clinical training. One or two students every four weeks. Director: P. Motamedinia
Surg 171, Vascular Surgery Subinternship  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 operating room, ICU, and the vascular surgery unit). Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One student every four weeks. Director: C. Ochoa Chaar

Surg 172, Transplantation Surgery Subinternship  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 on the management of immunosuppressive medication regimens and the care of post-transplant problems. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One student every four weeks. Director: S.H. Emre

Surg 174, Surgical Oncology Subinternship  Intensive exposure to surgical aspects of the treatment of cancer in the clinic, hospital, and operating room. The interaction among surgery, medical oncology, and radiation therapy is experienced by following patients receiving multiple forms of therapy. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. Maximum of four students every four weeks. Director: A.B. Chagpar

Surg 176/Peds 143, Pediatric Surgery Subinternship  This subinternship provides an in-depth exposure to the broad spectrum of pediatric surgical problems. Specific attention is given to identifying the pediatric patient in crisis, a relevant skill whether or not the student pursues a career in surgery. Objectives include understanding the correction of major congenital anomalies, management of trauma, care of the critically ill child, and management of solid tumors. Experience includes in-depth exposure to the pediatric operating room, training in neonatal and pediatric critical care, and experience in the pediatric surgical outpatient clinic. The student is an integral part of the pediatric surgical team. Prerequisite: completion of third-year clerkships. One student every four weeks. Director: E.R. Christison-Lagay

Surg 203, Otolaryngology Elective  This two-week clinical elective includes experience in the operating room, wards, outpatient clinics, conferences, didactics, and tumor board; the experience is similar to the Otolaryngology Subinternship but allows students more flexibility in choosing to participate in operations and clinics of special interest to them. The rotation is divided into one-week blocks, including the head and neck service (H&N cancer/reconstructive surgery, laryngology) and the ENT specialty service (neurotology, pediatrics, sinus/skull base, facial plastics, general). Students improve their suturing skills and become comfortable performing a thorough but efficient head and neck examination and interpreting diagnostic tests and procedures that can be useful in all medical and surgical subspecialties. At the end of the rotation, students may (but are not required) to give a seven-minute presentation on a topic of their choice at the ENT grand rounds. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One or two students every two weeks. Director: S. Mehra
SURG 204, General Surgery Elective (YNHH/SRC)  Students become an integral part of the resident team, supervised by the chief resident and attending physicians on the general surgery service. Students participate in the management of general surgical inpatients, preoperative evaluations, and outpatient clinics. Students are expected to participate in all teaching conferences, Grand Rounds, and clinics, and to attend the core curriculum conference each week. The goal is to provide an educational experience that will be of value to students’ eventual practice, regardless of which specialty they enter. Open to fourth-year students only. One or two students every four weeks. Director: G. Kaml

SURG 208, Burn Surgery Elective (Bridgeport Hospital)  This rotation provides intensive exposure to the care of the acutely burned patient: surgical and nonsurgical care, critical care, and outpatient wound care. Large burn injuries evoke the most severe critical illness known to medicine. Patients with such injuries are unstable for prolonged periods of time and require responsive and attentive critical care. The student participates in this care, including procedures performed in the burn intensive care unit. Assessment of burn depth and the prognosis for wound healing are often far from straightforward, and the student participates in this assessment process with the rest of the team, learning to gauge depth and prognosis via examination of multiple patients. Operative therapy for burns includes excisional debridement and often split-thickness skin grafting, but there are multiple choices to be made in providing optimal care to a particular patient. The student learns the rudiments of this decision-making process and is an active participant in all operations performed by the burn team. One student every four weeks. Director: A. Savetamal

SURG 209, Congenital Heart Surgery Elective  Students actively participate in the diagnosis, treatment, and operative and postoperative management of patients with congenital heart disease. Daily rounds on adult and pediatric cardiothoracic patients. Students receive a large exposure to pediatric and adult surgical cardiac ICU care. One or two students every four weeks.

SURG 211, Surgical Critical Care Subinternship (VAMC/SICU)  Students are assigned advanced clinical duties in the field of surgical critical care. Students spend time in the surgical intensive care unit (SICU), where they participate in the management of critically ill surgical patients, including general surgical, vascular, urologic, cardiothoracic, and neurosurgical patients. Topics covered include cardiopulmonary resuscitation, airway and ventilator management, fluid management, nutritional support, and the management of sepsis. Students can participate in all invasive procedures in the SICU, including bedside tracheostomy, percutaneous gastrostomy placement, bronchoscopy, and arterial and central venous catheter placement. Under the supervision of the intensive care attending physician, students are directly responsible for one to two critical care patients. Students present on rounds each day and assist in providing family and primary service communication. Prerequisite: completion of third-year surgery and medicine clerkships. Open to fourth- and fifth-year students only. One student every four weeks. Director: M.F. Perkal
SURG 217, Endocrine Surgery Subinternship This elective exposes the student to in-depth clinical and surgical aspects of endocrine surgery. Special emphasis is placed on the multidisciplinary approach to the endocrine patient, understanding the laboratory and radiologic studies, cytopathology, biochemical analysis, preoperative stabilization of patients, intraoperative decision-making, and postoperative follow-up and outpatient evaluation of patients. Technical skills are emphasized as well for students interested in improving their surgical hands. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One or two students every four weeks. Director: G. Callender

SURG 7091, Bariatric Surgery Subinternship (SRC) Students learn about the multidisciplinary approach to bariatric surgery, its indications, types of bariatric surgery, postoperative care of these patients, and evaluation and management of complications thereof. Assisting in the care of patients in the hospital ward, emergency room, operating room, and clinic, students gain familiarity with the anatomy and pathophysiology of conditions addressed by and related to bariatric surgery; are exposed to nonbariatric cases, with minimally invasive foregut surgeries and hernia repairs; and learn the principles and applications of laparoscopy. Many cases include upper endoscopy. Prerequisite: completion of third-year clerkships. Open to fourth- and fifth-year students only. One student every four weeks. J. Passarelli
THERAPEUTIC RADIOLOGY

HRT 140, 203.785.2956
http://medicine.yale.edu/therapeuticradiology


Professor (Adjunct) of Research  K. Low


Senior Research Scientist  D.E. Brash

Associate Research Scientists  M. Kaushik, H. Lee, Q. Lin, Y. Lu, W. Muhammad, A. Narayan

Clinical Professor  D.E. Brash

Associate Clinical Professor  J.G. Cardinale

Assistant Clinical Professors  J.Y. Chung, N. Housri, C.A. Knowlton, H. Park, K.R. Patel, M. Young

Lecturer  H.M. Lincoln

THER 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 ninety and one hundred ten 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. R.H. Decker and staff

THER 101b, 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 Radiobiology staff

THER 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

THER 300, Radiation Oncology Elective  A flexible program designed to introduce the student to radiation oncology. Students become familiar with the biological and physical basis of radiation oncology, together with clinical practice and ongoing research. This elective offers clinical exposure to patients with malignant disease, with between seventy-five and one hundred patients treated daily in the department. The student takes part in departmental conferences, clinics, lectures, and individual training sessions. Maximum of three students every four weeks. Director: H. Park

THER 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.

THER 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: THER 305 or its equivalent. Scheduling by arrangement with instructor.
UROLOGY

FMP 300, 203.737.6038
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Professors  T.C. Chai, J.W. Colberg, H.E. Foster, B. Lytton (Emeritus), D. Petrylak (Medicine), P. Schulam (Chair), R.M. Weiss

Associate Professors  A.B. Hittelman, C.R. Loose (Adjunct), L.M. Rickey


Instructors  J. Brito, J. Huang

Research Scientist  D.T. Martin

Associate Research Scientists  M. Cartiera, K. Ghabili Amirkhiz, M. Lu, A. Suarez-Sarmiento

Clinical Professors  I. Franco, S.C. Honig

Assistant Clinical Professor  R.F. Stroup

Urology electives are listed under the Department of Surgery.
Yale Cancer Center

WWW 205, 203.785.4095
Director: C.S. Fuchs
http://yalecancercenter.org

MEMBERSHIP

Professors

K.S. Anderson (Pharmacology), S. Ariyan (Surgery), P.W. Askenase (Internal Medicine), M. Azodi (Obstetrics, Gynecology & Reproductive Sciences), A.E. Bale (Genetics), L.M. Bartoshuk (Emeritus; Surgery), S. Baserga (Molecular Biophysics & Biochemistry), J.R. Bender (Internal Medicine), A.M. Bennett (Pharmacology), S.L. Bernstein (Emergency Medicine), J.L. Bolognia (Dermatology), M.W. Bosenberg (Dermatology), A.L.M. Bothwell (Immunobiology), R.R. Breaker (Molecular, Cellular & Developmental Biology), R. Bucala (Internal Medicine), B. Burtness (Internal Medicine), N. Carrasco (Cellular & Molecular Physiology), R.E. Carson (Radiology & Biomedical Imaging; Biomedical Engineering), T.C. Chai (Urology), S. Chang (Laboratory Medicine), L. Chen (Immunobiology), Z. Chen (Therapeutic Radiology), Y.-C. Cheng (Pharmacology), E.B. Claus (Public Health), J.W. Colberg (Urology), L. Cooley (Genetics; Cell Biology; Molecular, Cellular & Developmental Biology), J. Costa (Pathology), J. Craft (Internal Medicine), P. Cresswell (Immunobiology), C.M. Crews (Molecular, Cellular & Developmental Biology), G.V. Desir (Internal Medicine) F. Detterbeck (Surgery), V.T. DeVita, Jr. (Internal Medicine), D.C. DiMaio (Genetics), J.S. Duncan (Radiology & Biomedical Imaging), R.L. Edelson (Dermatology), J.P. Eder (Internal Medicine), B.E. Ehrlich (Pharmacology), J.A. Ellman (Chemistry), D. Engelman (Molecular Biophysics & Biochemistry), R.A. Flavell (Immunobiology), F. Foss (Dermatology), C.S. Fuchs (Cancer Center), J.E. Galán (Microbial Pathogenesis), J. Geibel (Surgery), M.B. Gerstein (Molecular Biophysics & Biochemistry), A.J. Giraldez (Genetics), M. Girardi (Dermatology), P.M. Glazer (Therapeutic Radiology), E.J. Giusac (Pathology), S. Gore (Cancer Center), C.P. Gross (Internal Medicine), M. Gunel (Neurosurgery; Neuroscience), D. Hafler (Medical Oncology), R. Herbst (Medical Oncology), S. Herzon (Chemistry), H. Hetherington (Adjunct; Neurosurgery), S.A. Higgins (Therapeutic Radiology), M.W. Hochstrasser (Molecular Biophysics & Biochemistry), T.R. Holford (Public Health), S.D. Hudnall (Pathology; Laboratory Medicine), D.F. Hyder (Radiology & Biomedical Imaging), K.L. Insogna (Internal Medicine), M.L. Irwin (Public Health), A. Iwasaki (Immunobiology; Molecular, Cellular & Developmental Biology), W.L. Jorgensen (Chemistry), A.C. Justice (General Medicine; Public Health), P.B. Kavathas (Laboratory Medicine), K.K. Kidd (Genetics), K. Kim (Radiology & Biomedical Imaging), H.M. Kluger (Cancer Center), M.T. Knobf (School of Nursing), A.J. Koleske (Molecular Biophysics & Biochemistry), W.H. Konigsberg (Molecular Biophysics & Biochemistry), M. Ko zal (Internal Medicine), D.S. Krause (Laboratory Medicine), S. Krishnan-Sarin (Psychiatry), G. Kupfer (Pediatrics), J. Lacy (Internal Medicine), D.R. Lannin (Surgery), F.Y. Lee (Orthopaedics & Rehabilitation), D.J. Leffell (Dermatology), M.A. Lemmon (Pharmacology), P. Lengyel (Emeritus; Molecular Biophysics & Biochemistry), A. Levchenko (Engineering & Applied Science), R.C. Lilenbaum (Medical Oncology), H. Lin (Cell Biology), E. Lolis (Pharmacology), J.A. Longtine (Pathology), P. LoRusso
The center supports a $86.7 million research base to promote translational research through collaborations between and within seven basic, epidemiological, and clinical research programs. Basic research programs in Signal Transduction; Genomics, Genetics, and Epigenetics; Virus and Other Infection-associated Cancers; and Developmental Therapeutics are integrated with clinical research programs in Cancer Immunology and in Radiobiology and Radiotherapy, and with one epidemiological program, Cancer Prevention and Control. The center also supports eight shared facilities that are available for oncological research: Flow Cytometry, Cesium-137 Irradiator, Rapid Case Ascertainment, Biostatistics and Bioinformatics, Clinical Research Services, Yale Center for Genome Analysis, Yale Pathology Tissue Services, and Yale Center for Molecular Discovery. 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 740a, Advanced Pediatric Health Assessment and Clinical Practice** 2 credit hours. This course is designed to enhance the student’s pediatric health assessment skills and to introduce the student to the primary care of children from infancy through pre-adolescence. Key aspects of assessment, health promotion, and disease prevention in culturally diverse pediatric populations are discussed. Clinical applications of evidence-based practice guidelines in the care of children are reinforced through laboratory and simulation experiences, as well as through rotations in hospital newborn care settings. M. Swartz, N. Banasiak

**NURS 610a, Advanced Concepts and Principles of Diabetes Care Seminar** 2 credit hours. This seminar focuses on the concepts and principles of diabetes managed care based on the annually updated American Diabetes Association Standards of Care. It includes principles of primary care (screening, early detection, intervention, and patient education), secondary care principles related to diabetes management (various treatment modalities, patient education, and self-care), and tertiary care related to complications. These concepts and principles of care are presented relative to type of diabetes (type 1, type 2, gestational, diabetes in 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 psychological, social, occupational, and economic are also emphasized. Two hours per week. C. Cardenas
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, Combined Child and Adult Psychiatry, Dermatology, Diagnostic Imaging, Emergency Medicine, Internal Medicine Primary Care, Internal Medicine, Internal Medicine–Pediatrics, Interventional Radiology, Neurology, Neurosurgery, Obstetrics and Gynecology, Ophthalmology, Orthopaedics and Rehabilitation, Otolaryngology, Pathology, Pediatrics, Plastic Surgery, Psychiatry, Surgery, Therapeutic Radiology, Thoracic Surgery, Urology, and Vascular Surgery; appointments are made through the National Resident Matching Program or the appropriate specialty matching program (Ophthalmology and Urology). Residencies are also offered in Dentistry, Pediatric Dentistry, Oral Maxillofacial Surgery, and Podiatry. Subspecialty residency programs are offered in the following specialties:

- Anesthesiology
- Cardiotoracic Surgery
- Child Psychiatry
- Dermatology
- Diagnostic Radiology
- Emergency Medicine
- Internal Medicine
- Medical Genetics
- Neurology
- Neurosurgery
- Obstetrics and Gynecology
- Ophthalmology
- Orthopaedic Surgery
- Pathology and Laboratory Medicine (AP/CP)
- Pediatrics
- Plastic Surgery
- Psychiatry
- Surgery
- Urology

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 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 website (www.ynhh.org/gme/welcome-to-ynhhgme.aspx) or the Yale School of Medicine site (http://medicine.yale.edu/ysm/departments) and visiting the appropriate department.
Continuing Medical Education

The mission of the Yale 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 with commendation by the Accreditation Council for Continuing Medical Education as a provider of continuing medical education (CME). Under the auspices of Yale Medicine, 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 Yale educational conferences (Grand Rounds) are also open to all physicians for CME credit. Also available for physicians and certain other health care workers is the Online Learning Program, live conference webcasts, Connecticut Mandated Courses, and The Diabetes Newsletter.

The Yale CME website contains the most timely and detailed listing of all these events; see http://cme.yale.edu. Inquiries should be addressed to the Center for Continuing Medical Education, SHM CE-3, PO Box 208052, New Haven CT 06520-8052; telephone, 203.785.4578; e-mail, cme@yale.edu.
Doctors of Medicine

CLASS OF 2018

Pending completion of all requirements


Damian Apollo, B.S., University of Arizona; M.B.A., Yale University. *Depersonalization in the Emergency Department.* Emergency Medicine: Beth Israel Deaconess Medical Center, Boston, Mass.

Nicholas Apostolopoulos, B.A., Rutgers University. *An Investigation into the Role of Aldehyde Dehydrogenase 3a1 (ALDH3A1) in the Mouse Cornea.* Medicine–Preliminary: Yale New Haven Hospital, New Haven, Conn.; Ophthalmology: Yale New Haven Hospital, New Haven, Conn.

Adeolu Aromolaran, B.S., University of Maryland, College Park; M.H.S., Yale University. *Zika-Associated Microcephaly among Public and Private Hospitals in Salvador, Brazil.* Pediatrics: Children’s National Medical Center Program, Washington, D.C.


Adam Brownstein, B.A., Cornell University. Natural History and Management of Thoracic and Abdominal Aortic Branch Aneurysms. Internal Medicine: Johns Hopkins Hospital, Baltimore, Md.

Kate Buesser, A.B., Harvard University. Inter-rater Reliability of Physical Abuse Determinations and Abusive Fracture Incidence at a Level 1 Pediatric Trauma Center. Orthopaedic Surgery: Washington University/Barnes-Jewish Hospital, St. Louis, Mo.


Jonathan J. Cui, B.S., University of Pittsburgh; M.H.S., Yale University. *Identifying 90-Day Readmission Patterns Following Posterior Lumbar Fusion and Geriatric Hip Fracture in the Era of Bundled Payments.* Orthopaedic Surgery: Yale New Haven Hospital, New Haven, Conn.


Benoit Cyrenne, B.S., Queen’s University at Kingston. *Synergy of BCL2 and Histone Deacetylase Inhibition against Leukemic Cells from Cutaneous T-Cell Lymphoma Patients.* Dermatology: University of Toronto, Toronto, Canada

Eunice Modupe Martins DeFilippo, B.A., Rutgers University. *Syrian Refugee Health: A Qualitative Analysis of Experiences with the U.S. Healthcare System.* Internal Medicine/Pediatrics: Yale New Haven Hospital, New Haven, Conn.

Moises Dominguez, B.S., City University of New York, City College. *Enhancing a Neurology Clerkship Curriculum Using Just-In-Time Teaching with Video-Based Learning.* Neurology. New York Presbyterian Hospital—Cornell, New York, N.Y.


Katherine Abigail Epstein, B.A., Princeton University; M.A., University of Minnesota. *Smoking Cessation and Outcome after Ischemic Stroke or TIA.* Psychiatry: Beth Israel Deaconess Medical Center, Boston, Mass.

Jeffrey Mark Erfe, B.A., Stanford University; M.P.H., University of the Philippines, Manila. *LAG-3 Mediates Acute Rejection and Memory in Mouse Transplantation.* Thoracic Surgery: McGaw Medical Center of Northwestern University, Chicago, Ill.

Rance James Toshiji Fujiwara, B.S., Creighton University; M.B.A., Yale University. *National Variations in Costs and Complication Rates in Head and Neck Cancer.* Otolaryngology: UCLA Medical Center, Los Angeles, Calif.


David William Goldstein, B.S., M.H.S., Yale University. *Risk Prediction in Older Adults after Acute Myocardial Infarction: The SILVER-AMI Study*. Internal Medicine: Massachusetts General Hospital, Boston, Mass.


Simon Matthew Gray, B.S., University of Maryland—Baltimore County; M.Phil., University of Cambridge; Ph.D., Yale University. *PRC2-Mediated H3K27me3 Repression Promotes Effector CD8+ T Cell Terminal Differentiation and Loss of Multipotency*. Internal Medicine (Research): University of North Carolina Hospitals Program, Chapel Hill, N.C.


Adrian Haimovich, B.S., Columbia University; Ph.D., Yale University. *Protein Programming in Recoded Organisms Enables Biological Containment and Synthetic Phosphomimicry*. Emergency Medicine (Research): Yale New Haven Hospital, New Haven, Conn.
Wendy Xiao Herman, B.S., Emory University; Ph.D., Yale University. Intracranial EEG Signatures of Conscious Visual Perception. Pediatrics: University of Pittsburgh Medical Center, Pittsburgh, Pa.

Soonwook Hong, B.A., Yale University. Characterization of Hemodynamic Phenotypes in Young Patients with Isolated Diastolic Hypertension and Systolic Diastolic Hypertension. Internal Medicine: New York University School of Medicine, New York, N.Y.


Emily R. Hyun, B.A., Dartmouth College. Pathways to Care in First-Episode Psychosis. Psychiatry: Yale New Haven Hospital, New Haven, Conn.

Zainab Olabisi Jaji, B.A., Gustavus Adolphus College; M.H.S., Yale University. Mitochondrial Calcium in Diabetic Platelets: Friend or Foe? Internal Medicine: Brigham & Women's Hospital, Boston, Mass.


Habib Mujib Khan, B.A., University of Michigan—Ann Arbor; M.H.S., Yale University. Genetics and Pathobiology of GJA1 Mutations in Erythrokeratodermia Variabilis et Progressiva. Medicine–Preliminary: Yale New Haven Hospital, New Haven, Conn.; Dermatology: Case Western Reserve University, Cleveland, Ohio

Marquita Nicole Kilgore-Nolan, B.S., Emory University; Certificate in Global Medicine, Yale University. The Ecosystem of Women's Health Social Enterprises Based in the United States. Obstetrics and Gynecology: Duke University Medical Center, Durham, N.C.

Rachel E. Klausner, B.S., University of Florida. Evaluation of Pulse Oximetry as a Screen for Critical Congenital Heart Disease in Newborns. Internal Medicine/Pediatrics: Vanderbilt University Medical Center, Nashville, Tenn.


Tambudzai Kudze, B.A., Bennington College; M.H.S, Yale University. Are There Sex-Specific Differences in Arteriovenous Fistula Maturation? Obstetrics and Gynecology: Brown University/Women & Infants Hospital, Providence, R.I.

Ashton C. Lai, B.S., Duke University; Ph.D., Yale University. Exploring Protein Degradation Technology as a Novel Therapeutic Strategy. Internal Medicine: Icahn School of Medicine at Mount Sinai, New York, N.Y.


Alvin Li, B.S., University of California – Los Angeles; M.H.S., Yale University. Correlations among Topical Corticosteroid Phobia, Treatment Adherence, and Clinical Outcomes in Pediatric Atopic Dermatitis. Transitional: Memorial Sloan Kettering Cancer Center, New York, N.Y.; Dermatology: McGaw Medical Center of Northwestern University, Chicago, Ill.


Andrew Joseph Loza, B.S., Notre Dame University; Ph.D., Washington University in St. Louis. Structure, Dynamics, and Regulation of Collective Cell Migration. Internal Medicine/Pediatrics: Yale New Haven Hospital, New Haven, Conn.


Chris A. Marfo, B.S., Rutgers University; M.B.A., Yale University. *The Value of a Picture: Improving the Accuracy of Burn Assessment and Quality of Care through Telemedicine in a Level 1 Pediatric Trauma Center.* General Surgery: University of Washington Affiliated Hospitals, Seattle, Wash.


Goran Mićević, B.S., Iowa State University; Ph.D., Yale University. *The Role of DNA Methylation in Melanoma Formation and Progression.* Medicine–Preliminary: Yale New Haven Hospital, New Haven, Conn.; Dermatology: Yale New Haven Hospital, New Haven, Conn.


Julio Montejo, A.B., Harvard University; M.H.S., Yale University. *Meningioma Genomics: Gene Discovery, Molecular Mechanisms, and Clinical Correlations.* Neurosurgery: Dartmouth-Hitchcock Medical Center, Lebanon, N.H.


Neal Nolan, B.S., Cornell University; M.H.S., Yale University. *The Role of FOXG1 Overexpression in the Pathogenesis of Severe, Macrocephalic Autism Spectrum Disorder.* Medicine–Preliminary (Neurology): Massachusetts General Hospital, Boston, Mass.; Neurology: Brigham & Women’s Hospital/Massachusetts General Hospital, Boston, Mass.

Nathaniel Thomas Ondeck, B.S., Carnegie Mellon University; M.H.S., Yale University. *Improving Large Data Research: An Analysis of Comorbidity Indices and Approaches to Missing Values.* Orthopaedic Surgery: Hospital for Special Surgery, New York, N.Y.
Curtis Jamison Perry, B.S., Ph.D., Yale University. Optimizing T and Myeloid Cell Function in Chronic Viral Infection and Cancer. Internal Medicine: Yale New Haven Hospital, New Haven, Conn.

Max Christian Petersen, B.A., Augustana College; Ph.D., Yale University. The Insulin Receptor as a Locus of Control in Hepatic Insulin Resistance. Internal Medicine: Massachusetts General Hospital, Boston, Mass.


Marco Antonio Ramos, Jr., B.A., Columbia University; Ph.D., Yale University. Making Disappearance Visible: Psychoanalysis, Trauma, and Human Rights in Cold War Argentina. Psychiatry: Yale New Haven Hospital, New Haven, Conn.

Julia Haven Raney, B.A., Claremont McKenna College; Certificate in Global Medicine, Yale University. Simulation-Based Nurse Mentoring to Promote Preeclampsia Care: What Is the Impact in Bihar, India? Pediatrics: Stanford University Programs, Stanford, Calif.


James Christopher Berg Reed, B.A., Dartmouth College; M.H.S., Yale University. Interaction of the Receptor for Advanced Glycation Endproducts and the T Cell Receptor Signaling Cascades. Pediatrics (Research): Icahn School of Medicine at Mount Sinai, New York, N.Y.


Robert Michel Rock, B.A., New York University. Using Art Observation in Museum Education to Broach Topics of Bias and Power among Health Professional Trainees. Family Medicine: Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, N.Y.


Ronnye Rutledge, A.B., Harvard University; M.H.S., Yale University. HIV Risk Perception and Eligibility for PrEP in Women Involved in the Criminal Justice System. Internal Medicine/Pediatrics: Brigham & Women’s Hospital/Children’s Hospital/Harvard, Boston, Mass.
Susan Elizabeth Scanlon, B.S., Ph.D., Yale University. Regulation of DNA Repair by Hypoxic Stress and Hypoxia-Related Pathways. Medicine–Preliminary: St. Mary’s Hospital Program, Waterbury, Conn.; Radiation Oncology: Yale New Haven Hospital, New Haven, Conn.

Réginald Sévère, B.S., Cornell University; M.S., Johns Hopkins University. How Acculturation Informs Depressive Symptoms, Experiences of Discrimination, and Race-Related Stressors. Emergency Medicine: Boston University Medical Center, Boston, Mass.

Andi Shahu, B.S., Johns Hopkins University; M.H.S., Yale University. Disparities in Socioeconomic Context and Response to Antihypertensive Medication in the Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial (ALLHAT). Internal Medicine: Johns Hopkins Hospital, Baltimore, Md.


Andrew Howard Smith, B.A., Northwestern University; Ph.D., Yale University. Genomics of Addiction: Dependence, Consequences, and Cessation. Psychiatry (Physician Scientist): Icahn School of Medicine at Mount Sinai, New York, N.Y.

Alex Stewart, B.S., City University of New York, City College; Ph.D., Albert Einstein College of Medicine. Synthetic Antibody Engineering: i) Target glycans ii) Recognition features of D5 variants in binding to HIV-1 5-Helix. Anesthesiology: New York Presbyterian Hospital—Cornell, New York, N.Y.


Alexander Haosi Sun, B.S., Duke University; M.H.S., Yale University. Altered Brain Functional Connectivity Varies by Form of Craniosynostosis. Plastic Surgery (Integrated): Johns Hopkins Hospital, Baltimore, Md.

Eleanor Varian Thomas, B.A., B.S., Brown University; Ph.D., Yale University. Transfer of Pathogenic and Non-Pathogenic Cytosolic Proteins between Motor Neurons In Vivo in Chimeric Mice. Medicine–Preliminary (Neurology): Emory University School of Medicine, Atlanta, Ga.; Neurology: Emory University School of Medicine, Atlanta, Ga.

Andrew Thomas Timberlake, B.S., Ph.D., Yale University. Exome Sequencing Reveals Novel Genetic Causes of Non-Syndromic Craniosynostosis. Plastic Surgery (Integrated): New York University School of Medicine, New York, N.Y.

Cynthia Tsay, B.A., Yale University; M.Phil., University of Cambridge. Genetic Sequencing of Pituitary Adenomas from the Harvey Cushing Tumor Registry. Internal Medicine: Yale New Haven Hospital, New Haven, Conn.

Radovan (Alex) Vasic, A.B., Harvard University; M.H.S., Yale University. Role of the RNA Modification N6-methyladenosine in Normal Hematopoiesis and Disease. Internal Medicine: University of Toronto, Toronto, Canada


Urs Michael Weber, B.A., Boston University. Dedicated Afternoon Rounds for ICU Patients’ Families and Family Satisfaction with Care. Internal Medicine: Yale New Haven Hospital, New Haven, Conn.


Siyu (Sue) Xiao, B.S., University of Pittsburgh; Certificate in Global Medicine, Yale University. Tension in the Chinese Doctor-Patient-Family Relationship: A Qualitative Study in Hunan Province, China. Obstetrics and Gynecology: Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, N.Y.

Xiaolu Xu, B.S., Sun Yat-sen University; Ph.D., Washington University in St. Louis. Phosphorylation Regulation of T Lymphocyte Migration. Plastic Surgery (Integrated): Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, N.Y.

Genevieve Jia-Wei Yang, B.A., Columbia University; Ph.D., Yale University. *Modeling Neuronal Dysfunction in Schizophrenia to Predict Neuroimaging Biomarkers.* Psychiatry (Physician Scientist): Icahn School of Medicine at Mount Sinai, New York, N.Y.


Emily Sara Yin, B.S., M.H.S., Yale University. *Biodegradable Nanoparticles in the Treatment of Cutaneous Malignancy.* Medicine–Preliminary: Icahn School of Medicine at St. Luke's Roosevelt Hospital Center, New York, N.Y.; Dermatology: New York University School of Medicine, New York, N.Y.

Nicole Sitkin Zelin, B.S., University of California—Davis. *Specialty Choice among Sexual and Gender Minorities in Medicine.* Psychiatry: Stanford University Programs, Stanford, Calif.


STUDENTS RECEIVING THE M.D. AND PH.D. DEGREES

Alexander Reza Bazazi
Dipankar Bhattacharya
Simon Matthew Gray
Adrian Haimovich
Wendy Xiao Herman
Ashton C. Lai
Alexandria Marino
Goran Mićević
Curtis Jamison Perry
Max Christian Petersen
Amanda Ruth Quijano
Marco Antonio Ramos, Jr.
Susan Elizabeth Scanlon
Andrew Howard Smith
Eleanor Varian Thomas
Andrew Thomas Timberlake
Genevieve Jia-Wei Yang

STUDENTS RECEIVING THE M.D. AND M.H.S. DEGREES

Mehida Alexandre
Adeolu Aromolaran
Zola Afua Mansa Chihombori Quao
Jonathan J. Cui
Cyril Gary
David William Goldstein
Melody Yin Hu
Nancy Huynh
Zainab Olabisi Jaji
Habib Mujib Khan
Tambuzai Kudze
Alvin Li
Valerie Luks
Ryan Patrick McLynn
Julio Montejo
Fari Ngongoni
Neal Nolan
Nathaniel Thomas Ondeck
James Christopher Berg Reed
Ronnye Rutledge
Andi Shahu
Alexander Haosi Sun
Radovan (Alex) Vasic
Karri Weisenthal
Ava Chwan Lee Yap
Emily Sara Yin

STUDENTS RECEIVING THE M.D. AND M.B.A. DEGREES

Jeremy Paul Ader
Damian Apollo
Eamon Yeats Duffy
Rance James Toshiji Fujiwara
Edi Kapetanovic
Nicole Krenitsky
Chris A. Marfo
Sean Maroongroge
Allen F. Shih
Yuemei (Amy) Zhang

STUDENTS RECEIVING THE M.D. DEGREE
AND THE CERTIFICATE IN GLOBAL MEDICINE

Marquita Kilgore-Nolan
Julia Haven Raney
Siyu (Sue) Xiao
Enrollment for 2017–2018

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

Sarah Abdallah          Victoria Bartlett
Ahmad Abdel-Aty         Alexander Bazazi
Sarah Abelman           Kirthi Bellamkonda
Paul Abraham            Liliya Benchetrit
Zoe Adams               Juliana Berk-Krauss
Jeremy Ader             Elisa Berson
Aneesha Ahuwalia        Shivani Bhatt
Osama Ahmed             Dipankan Bhattacharya
Shawn Ahn               Shahan Bhullar
Charushi Ahuja           William Biche
Alexandra Albert        Sean Bickerton
Kareme Alder            Hadley Bloomhardt
Mehida Alexandre        Linette Bosques
Miguel Algara           Paul Bourdillon
Oriyomi Alimi           Patawut Bovonratwet
Matthew Alsaloum        Michael Boyle
Hannah Alter            Phillip Braun
Marcus Altman           Christopher Breen
Sarah Amalraj           Gregory Breuer
Nidharshan Anandasivam  Kristina Brown
Amber Anders            Adam Brownstein
Nientara Anderson       Katherine Buesser
Joana Andoh             Daniel Bui
John Andrews            Patrick Burroughs
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Damian Apollo           Raysa Cabrejo
Nicholas Apostolopoulos Sean Cahill
Adeolu Aromolaran       Elizabeth Calle
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Jonathan Avery         Ignacio Cerdena
Zachary Avigan         Nathan Chai
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Aminah Sallam
Tejas Sathe
Neil Savalia
Susan Scanlon
Alexander Scherer
Amy Schettino
Cortlandt Sellers
Reginald Severe
Lorenzo Sewanan
Tayyab Shah
Andi Shahu
Michael Shang
Madison Sharp
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<td>Daniel Shaw</td>
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<td>Sara Tannenbaum</td>
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<td>Gwendolyn Towers</td>
<td>Lee Ying</td>
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Laura Yockey
Jin Woo Yoo
Lucia You
Mark Youngblood
Kristin Yu
Sangwon Yun
Alp Yurter
Ramsey Yusuf
Theodore Zaki
Osama Zayyad
Seyedeh Zekavat
Nicole Zelin
Amy Zhang
Cc Zhang
Jingxian Zhang
Ke Zhang

Lucy Zhang
Yapei Zhang
Yuemei Zhang
Jack Zhao
Weige Zhao
Melanie Zheng
Amanda Zhou
Melissa Zhou
Sonya Zhou
Rebecca Zhu
Chloe Zimmerman
Christopher Zirker
Cheryl Zogg
Constance Zou
Alyssa Zupon

Total, 559

REGISTERED FOR THE COMBINED M.D./PH.D. DEGREE

Shawn Ahn
Alexandra Albert
Matthew Alsaloum
Emmanuella Asabor
Daniel Barson
Alexander Bazazi
Shivani Bhatt
Dipankan Bhattacharya
Sean Bickerton
Gregory Breuer
Nashid Chaudhury
Jennifer Chen
Adriana Cherskov
Ryan Chow
William Culligan
Stefano Daniele
Andrew Daniels
Dimitri De Kouchkovsky
Tyrone DeSpenza
Matthew Dong
Swethasri Dravida
Nicholas Economos
Margret Erlendsdottir
Calvin Fang
Erin Feeney

Alborz Feizi
Carrie Flynn
James Garritano
Luis Gonzalez
Elsie Gonzalez-Hurtado
Justin Goodwin
Michael Gormally
Simon Gray
Sydney Green
Abigail Greene
Casey Grun
Kenneth Gunasekera
Adrian Haimovich
William Hancock-Cerutti
Wendy Herman
Grant Higerd
Corey Horien
Brandon Hubbard
Woong Hwang
Jillian Jaycox
Amanda Jeng
Ruoyi Jiang
Justin Johnson
Jessica Johnston
Alanna Kaplan
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<tr>
<th>Name</th>
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<tr>
<td>Laurel Kaye</td>
<td>Curtis Perry</td>
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<tr>
<td>Shihan Khan</td>
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<td>Ramak Khosravi</td>
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<td>Daniel Kim</td>
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<td>Zachary Kloos</td>
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<td>Sahana Kribakaran</td>
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<td>Katherine Leiby</td>
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<td>Alice Li</td>
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<td>Don Li</td>
<td>Hoyeon Song</td>
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<td>Alexandra Suberi</td>
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<td>Young Lim</td>
<td>Alexander Svoronos</td>
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<td>Rebecca Liu</td>
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<td>Anna Lynn</td>
<td>Rebecca Treger</td>
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<td>Diana Yanez</td>
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<td>William Meyerson</td>
<td>Genevieve Yang</td>
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<td>Goran Micevic</td>
<td>Jessica Ye</td>
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<td>Jessica Minor</td>
<td>Lee Ying</td>
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<td>Kavita Mistry</td>
<td>Laura Yockey</td>
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<td>Alyssa Mitson-Salazar</td>
<td>Mark Youngblood</td>
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<tr>
<td>Danielle Miyagishima</td>
<td>Sangwon Yun</td>
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<tr>
<td>Raman Nelakanti</td>
<td>Seyyedeh Zekavat</td>
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<td>Mytien Nguyen</td>
<td>Ce Zhang</td>
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<td>Samantha Olyha</td>
<td>Ke Zhang</td>
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<tr>
<td>Laura Pappalardo</td>
<td>Cheryl Zogg</td>
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<td>Annsea Park</td>
<td>Total, 133</td>
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<tr>
<td>Jonathan Park</td>
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<tr>
<td>Kevin Perkins</td>
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REGISTERED FOR THE COMBINED
M.D./M.H.S. DEGREE

Mehida Alexandre
Nientara Anderson
Prince Antwi
Adeolu Aromolaran
Raysa Cabrejo
Herbert Castillo Valladares
Tafadzwa Chaunzwa
Zola Chihombori Quao
Shang-Lin Chung
Jonathan Cui
Jonathan Gaillard
Cyril Gary
David Goldstein
Peter Hetzler
Melody Hu
Nancy Huynh
Zainab Jaji
Habib Khan
Tambudzai Kudze
Alison Lee
Alvin Li
Valerie Luks
Renee Maina
Patrick McGillivray
Ryan Mc Lynn
Julio Montejo
Elliot Morse
Rejoice Ngongoni
Neal Nolan
Nathaniel Ondeck
James Reed
Ronnye Rutledge
Tejas Sathe
Andi Shahu
Alexander Sun
Noel Turner
Evgeniya Tyrtova
Radovan Vasic
Mike Wang
Karrin Weisenthal
Nicholas Wilcox
Ava Yap
Emily Yin

Total, 43

REGISTERED FOR THE COMBINED
M.D./M.B.A. DEGREE

Jeremy Ader
Nidharshan Anandasivam
Damian Apollo
Di Deng
Eamon Duffy
Maxwell Farina
Jennifer Fischer
Rance Fujiwara
Edi Kapetanovic
Nicole Krenitsky
Chris Marfo
Sean Maroongroge
Anusha Raja
Allen Shih
Yuemei Zhang

Total, 15

REGISTERED FOR THE COMBINED
M.D./M.P.H. DEGREE

Tehreem Rehman

Total, 1
REGISTERED FOR THE
PHYSICIAN ASSOCIATE PROGRAM

Victoria Ahrens
Shreya Amin
Sarah Anaya
Kai Ando
Kristin Andres
Jose Arciniega
Caroline Argyros
Rebecca Arko
Stephanie Baluka
James Barbosa
Adam Bartling
Courtney Batchelor
Carla Becerra
Tess Boeker
Julie Butera
Christina Carbone
Naiska Cheung
Juyeon Chung
Rachel Cohen
Mahra Colvin
Amanda Connell
Sara Connolly
Andrew Cook
Benjamin Crown
Lauren Culy
Kristin Dalphon
Susan David
Rachel Dayan
Taylor Dempsey
Caroline deSaussure
Lia DiMartino
Matthew Drause
Taylor Edwards
Hanna Eldred
Zachary Ewell
Katherine Farnsworth
Meliza Fazio
Scott Freeberg
Katherine Furland
Julie Gedalecia
Michelle Giwerc
Nusheen Goshtasbi
Mallory Grosso
Katherine Gruppo
Matthew Gueble
Brittany Haugen
Olivia Hayward
Kevin Howard
Alexander Jewett
Emily Jimenez
Vincenzo Julian
Katrin Kahl
Patrick Ketchersid
Yeon Sun Kim
Amy Kole
Yunru Lai
Kelsey Leder
Jonathan Lee
Zhao Li Amy Li
Jamie Lines
Yiwei Ling
Danielle Lockwood
Benjamin Marks
Molly Marsh
Sean McCarthy
Rebecca McCurdy
Stephanie Mock
Lana Monashkin
Corinne Morrison
Jeannette Mutch
Marc Nault
Lauren O’Brien
Lawrence Olala
David Oshiro
Paige Ourada
Tyler Phelan
Elizabeth Philbrick
Christopher Piel
Angela Preda
Lauren Prince
Sabrina Puvalowski
Sarah Rocks
Sarah Savoia  
Clayton Schutz  
Catherine Schwing  
Sheila Sennett  
Editha Setiawan  
Dennis Shea  
Rachel Singley  
Ariel Skalka  
Libby Slosburg  
Laura Smith  
Jason Sotomayor  
Meghan Sowers  
Emily Speck  
Paxton Stein  
Faye Steiner  

Yukari Suzuki  
Randall Swyers  
Mark Tatera  
Jessie Tijl  
Emily To  
Nicole Torchia  
Madeline Tropp-Bluestone  
Victoria Viveen  
Alan Vlieg  
Emily Walwood  
Rachel Wenninger  
Samantha Wright  
Christopher Yegge  
Connie Zuo  

Total, 113

REGISTERED FOR THE  
PHYSICIAN ASSISTANT ONLINE PROGRAM

Ayesha Ahmed  
Joshua Amano  
Amanda Amster  
Nilofar Ariasaif  
Macy Baig  
Julie Ballard  
Mary Bradley  
Julia Burke  
Marissa Clark  
Danae Davis  
Rebecca Dronet  
Andrew Galbraith  
Mary Garrison  
Kelly Green Boesen  
Kelly Greenville  
Shiva Kasravi  
Sarah Kelly  
Rose Knight  
Christina Kvistad  
Micaela Kwochka  
Sandra Lyman  

Rachel Marcus  
Steven Montague  
Jordan Morris  
Deborah Noghreyan  
Rebecca Preston  
Caraline Risinger  
Yermiahu Sarne  
Bianca Sayegh  
Melissa Smith  
Tammy St. Louis  
Dustin Vuong  
Joshua Wageman  
Eugenie Weaver  
Phillip Weaver  
Angela Wei  
Jeniece Wert  
Jennifer Wood  
Sheila Yack  
Sean Yarbrough  
David Yeh  

Total, 41
REGISTERED FOR THE COMBINED M.M.SC./M.P.H DEGREE

Ben Artin
Kamal Javadi

Total, 2
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 visit http://admissions.yale.edu, e-mail student.questions@yale.edu, or call 203.432.9300. Postal correspondence should be directed to Office of Undergraduate Admissions, Yale University, PO Box 208234, New Haven CT 06520-8234.

Graduate School of Arts and Sciences  Est. 1847. Courses for college graduates. Master of Advanced Study (M.A.S.), Master of Arts (M.A.), Master of Science (M.S.), Master of Philosophy (M.Phil.), Doctor of Philosophy (Ph.D.).

For additional information, please visit http://gsas.yale.edu, e-mail graduate.admissions@yale.edu, or call the Office of Graduate Admissions at 203.432.2771. Postal correspondence should be directed to Office of Graduate Admissions, Yale Graduate School of Arts and Sciences, PO Box 208236, New Haven CT 06520-8236.

School of Medicine  Est. 1810. 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. Five-year combined program leading to Doctor of Medicine and Master of Health Science (M.D./M.H.S.). Combined program with the Graduate School of Arts and Sciences leading to Doctor of Medicine and Doctor of Philosophy (M.D./Ph.D.). Master of Medical Science (M.M.Sc.) from the Physician Associate Program and the Physician Assistant Online Program.

For additional information, please visit http://medicine.yale.edu/education/admissions, e-mail medical.admissions@yale.edu, or call the Office of Admissions at 203.785.2643. Postal correspondence should be directed to Office of Admissions, Yale School of Medicine, 367 Cedar Street, New Haven CT 06510.


For additional information, please visit http://divinity.yale.edu, e-mail div.admissions@yale.edu, or call the Admissions Office at 203.432.5360. Postal correspondence should be directed to Admissions Office, Yale Divinity School, 409 Prospect Street, New Haven CT 06511.

Law School  Est. 1824. Courses for college graduates. Juris Doctor (J.D.). For additional information, please visit http://law.yale.edu, e-mail admissions.law@yale.edu, or call the Admissions Office at 203.432.4995. Postal correspondence should be directed to Admissions Office, Yale Law School, PO Box 208215, New Haven CT 06520-8215.

Graduate Programs: Master of Laws (LL.M.), Doctor of the Science of Law (J.S.D.), Master of Studies in Law (M.S.L.). Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences. For additional information, please visit http://law.yale.edu, e-mail gradpro.law@yale.edu, or call the Graduate Programs Office at
203.432.1696. Postal correspondence should be directed to Graduate Programs, Yale Law School, PO Box 208215, New Haven CT 06520-8215.

School of Engineering & Applied Science  Est. 1852. Courses for college graduates. Master of Science (M.S.) and Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please visit http://seas.yale.edu, e-mail grad.engineering@yale.edu, or call 203.432.4252. Postal correspondence should be directed to Office of Graduate Studies, Yale School of Engineering & Applied Science, PO Box 208267, New Haven CT 06520-8267.

School of Art  Est. 1869. Professional courses for college and art school graduates. Master of Fine Arts (M.F.A.).

For additional information, please visit http://art.yale.edu, e-mail artschool.info@yale.edu, or call the Office of Academic Administration at 203.432.2600. Postal correspondence should be directed to Office of Academic Administration, Yale School of Art, PO Box 208339, New Haven CT 06520-8339.


For additional information, please visit http://music.yale.edu, e-mail gradmusic.admissions@yale.edu, or call the Office of Admissions at 203.432.4155. Postal correspondence should be directed to Yale School of Music, PO Box 208246, New Haven CT 06520-8246.

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 visit http://environment.yale.edu, e-mail fesinfo@yale.edu, or call the Office of Admissions at 800.825.0330. Postal correspondence should be directed to Office of Admissions, Yale School of Forestry & Environmental Studies, 195 Prospect Street, New Haven CT 06511.

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 visit http://publichealth.yale.edu, e-mail ysph.admissions@yale.edu, or call the Admissions Office at 203.785.2844.

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 visit http://architecture.yale.edu, e-mail gradarch.admissions@yale.edu, or call 203.432.2296. Postal correspondence should be directed to the Yale School of Architecture, PO Box 208242, New Haven CT 06520-8242.
School of Nursing  Est. 1923. Courses for college graduates. Master of Science in Nursing (M.S.N.), Post Master’s Certificate, Doctor of Nursing Practice (D.N.P.). Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please visit http://nursing.yale.edu or call 203.785.2389. Postal correspondence should be directed to Yale School of Nursing, Yale University West Campus, PO Box 27399, West Haven CT 06516-0974.


For additional information, please visit http://drama.yale.edu, e-mail ysd.admissions@yale.edu, or call the Registrar/Admissions Office at 203.432.1507. Postal correspondence should be directed to Yale School of Drama, PO Box 208325, New Haven CT 06520-8325.

School of Management  Est. 1976. Courses for college graduates. Master of Business Administration (M.B.A.), Master of Advanced Management (M.A.M.), Master of Management Studies (M.M.S.). Doctor of Philosophy (Ph.D.) awarded by the Graduate School of Arts and Sciences.

For additional information, please visit http://som.yale.edu. Postal correspondence should be directed to Yale School of Management, PO Box 208200, New Haven CT 06520-8200.
Travel Directions

See also http://medicine.yale.edu/maps/index.aspx. 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 American Airlines. 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 1. 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 1. 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.
Continued on next page
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, 35 Park 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
56. 10 Amistad St.
57. Amistad Garage
58. 270 Congress Ave.
59. 300 George St.
60. 350 George St.
61. 2 Church St. South