

Fellowship in Gynecologic Endoscopy
Affiliated with AAGL and The Society of Reproductive Surgeons

2008-2009 Fellowship Programs

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Director of Minimally Invasive Surgery Program & Fellowship
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2-Year Program

Description: This is a 2-year academic fellowship that incorporates clinical, research, and teaching responsibilities at the University of Michigan Medical Center. The overall goal of the post-graduate training program is to nurture over the course of two years an individual who will graduate with the skills needed to succeed in an academic career.

Surgically, the Minimally Invasive Surgery Program is a high volume practice that covers the gamut of advanced hysteroscopic and laparoscopic surgery as well as complex abdominal and vaginal surgery. Fellows will also rotate off-service and interact with our urogynecology and gynecologic oncology services as well as urology. A unique feature of this program is the incorporation of training in robotics as it applies to specific gynecologic procedures. The University of Michigan is one of only a few institutions performing robotic procedures in gynecology since 2001. Individuals will spend on average 2-3 days in surgery per week.

Clinically, post-graduate trainees will have significant involvement in the Chronic Pelvic Pain Program and the Endometriosis Center in order to gain skills in the management of complex gynecologic conditions such as advanced endometriosis, pelvic adhesive disease and ovarian remnant syndromes all the way to musculoskeletal and neuropathic disorders. Fellows will also have the responsibility of seeing patients in a half-day clinic of their own each week. Individuals can expect to be in the office an average of 1.5 days per week.

Fellows will have teaching responsibilities as they relate to the training of not only 20 housestaff in the obstetrics & gynecology residency program but also other fellows and attending level physicians both in the academic and community settings. Post-graduate trainees will serve in more of a role as a junior attending with intermittent service and call responsibilities.

Post-graduate trainees will have the advantage of being exposed to a wide variety of resources available at the University of Michigan as research requirements in the areas of complex gynecologic pathology and minimally invasive surgery are pursued. These resources range from an ability to pursue master level degrees in the areas of public health or clinical investigation to interacting with leading experts and researchers in the Schools of Biomedical Engineering and Engineering as well as in the various medical school departments. The University of Michigan Medical Center is also one of only a few institutions with a state-of-the-art clinical simulation center. Surgical laboratories with established gynecology protocols are also readily available for both inanimate and animate training and research. Fellows will have the opportunity to participate in the many ongoing clinical research projects taking place in the minimally invasive surgery program while also formulating new research ideas. The expectation is that these research projects will result in national presentations and peer-reviewed manuscripts. Protected academic research time is incorporated into the post-graduate training program.

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Faculty: Prabhat K. Ahluwalia, M.D. (Gynecologic Endoscopic Specialist), Kenneth D. Graniero, M.D. (General, Thoracic, and Trauma Surgery), Leo Sullivan, M.D. (General, Colorectal, and Trauma Surgery), Robert Fliesher, M.D. (Urology), Anthony Mandour, M.D. (Urology)

2-Year Program

Description: Over the past several years, physician's have rapidly adopted laparoscopic techniques because of its numerous patient benefits from enhanced precision and safe method of excess. At the same time, patient expectations for short hospital stays, quick recovery time, less pain and reduced risk of complications have also increased. As a result, there is a need to broaden the scope of laparoscopic OB/GYN training to reduce patient dissatisfaction from conversion to traditional open procedure.

The fellow will participate and have extensive hands on experience in complex endoscopic surgical techniques, research, pre-operative work-ups and post-operative follow-ups. In addition, the fellow will have multidisciplinary exposure to specialties such as colorectal endoscopic surgeons performing hand assisted laparoscopic and open bowel resection and repair, thoracic surgeons, and urologic services surgeons performing laparoscopic lung resection, and neisen fundoplication. Complex urodynamic workups will include cystoscopy prior to pelvic reconstruction partial or total, and TVT,TVT-O. Fellow will explore endometriosis treatment in-depth including bowel resections, cystorraphy, entereorraphy uretrolysis, and presacral neurectomy. Other hands-on experience will involve TLH, LAVH, myomectomies, adnexal surgeries, and adhesiolysis. Operative hysteroscopy will include use of resectoscope resection and ablation. Fellows will also share knowledge and supervise residents from Albany Medical Center.

This program will expose fellows extensively in gastrointestinal, urologic procedures enabling them to perform endoscopic management of unforeseen chalanges and maintain patient satisfaction. Fellow will get in depth experience in performing intraoperative sigmoidoscopy, cystoscopy, retrograde pyelogram, placement and removal of ureteral stents and ureteroscopy and exceed the guide lines for credentialing set forth by the respective boards.

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1-Year Program

Description: The fellowship program in Gynecologic Endoscopic Surgery at Vanderbilt University Medical Center is a one-year comprehensive program incorporating clinical, research, and educational activities. The fellow will benefit from a high surgical volume of three active surgeons whose collective focus includes a full spectrum of laparoscopic, hysteroscopic, and minimally invasive procedures including infertility, urogynecology, gynecologic oncology and general gynecology.

Surgical experience will be obtained at Vanderbilt hospital, a free-standing ambulatory surgical center, and through office-based procedures. The fellow will participate in both resident-based gynecologic clinics and an active private gynecologic consultative service. Teaching activities will include resident instruction in endoscopic technique using an advanced skills laboratory and supervision of basic endoscopic procedures. Participation in departmental grand rounds, didactic educational programs, and weekly conferences is expected. A required research project may take advantage of the many clinical or basic research opportunities ongoing in the division or may be uniquely designed by the fellow with faculty supervision.

Upon completion of this program, the fellow will be competent in a full spectrum of endoscopic surgical techniques and qualified to serve as a consultant in minimally invasive gynecologic surgery in an academic or private setting.

JON I. EINARSSON MD MPH
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Faculty: Antonio Gargiulo MD, James A. Greenberg MD, Neeraj Kohli MD, Michael Muto MD, Ginter Sotrel MD

2-Year Program

Description: Brigham and Women's Hospital is a highly ranked academic teaching hospital affiliated with Harvard Medical School. The Division of Obstetrics and Gynecology currently offers a full range of highly competitive fellowship programs in addition to a very busy resident teaching service. We are in a unique position to offer a strong candidate an opportunity to become proficient in a wide variety of MIGS techniques and to benefit from the large number of educational and research activities offered at our institution.

Our main goal is to graduate a competent MIGS surgeon as well as an academician that is ready to take on a leadership role within the MIGS community. The fellow will rotate with a number of experienced MIGS surgeons at Brigham and Women's Hospital (BWH) and Faulkner Hospital allowing for exposure to a variety of techniques and procedures throughout the training period. Some of the more commonly performed procedures include TLH, LSH, myomectomy, sacrocolpopexy and surgical treatment of advanced endometriosis. The fellow will also gain experience in robotic surgery, gynecologic oncology procedures and urogynecologic surgery. Members of the division also perform a number of other procedures, such as laparoscopic abdominal cerclage, laparoscopic uterine artery occlusion, laparoscopic presacral neurectomy and a full range of hysteroscopic procedures.

We believe it is very important to further incorporate evidence-based medicine into surgical practice. In an effort to support this concept the MIGS fellow will have an opportunity to obtain a Master of Public Health (MPH) degree through the Harvard School of Public Health (HSPH) Clinical Effectiveness Program. This unique program prepares physicians for clinical research responsibilities and for leadership roles in evaluating and improving all aspects of health care delivery.

There are ample research opportunities within BWH and through Harvard Medical School. The fellow is expected to complete a minimum of two clinical research projects to be presented at national meetings and published in peer-reviewed journals.

JOHN P.A. GEORGE, M.D., F.A.C.O.G.
Director, Gynecologic Endoscopy

ANDREW I SOKOL, M.D.
Associate Director, Section of Minimally Invasive Surgery

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1-Year Program

Description: The one year fellowship is designed to provide advanced didactics, skill and experience to physicians who have completed their residency in Obstetrics and Gynecology and who have a desire to become proficient in Gynecologic Endoscopy.

The fellow will gain experience in the performance of a wide variety of laparoscopic, robotic and hysteroscopic procedures. He/she will also rotate through the Division of Female Pelvic Medicine and Reconstructive Surgery. By the end of the fellowship year, he/she should be able to select, evaluate and counsel patients for advanced laparoscopic, robotic and hysteroscopic surgery. He/she should be knowledgeable regarding the risks, benefits and complications of laparoscopic, robotic and hysteroscopic surgery and should be able to utilize techniques that enhance patient safety in the performance of basic and complex procedures.

The Fellow will attend and also prepare lectures in basic and advanced laparoscopy, robotics, and hysteroscopy. He/she will attend and sponsor skills laboratory exercises in cystoscopy, laparoscopy, and hysteroscopy in a state-of-the-art simulator laboratory. He/she will participate in the evaluation and selection and provide post-operative care to patients for Gyn endoscopic and female pelvic reconstructive surgery. He/she will perform surgery as the first assistant, (and surgeon when appropriate) to patients having Gyn endoscopic and urologic operations.

By working closely with the Director and Associate Director of the program, the fellow is expected to become proficient in the treatment by minimally invasive surgery of conditions such as fibroids, endometriosis, ovarian cysts, and ectopic pregnancy. He/she should be able to perform procedures such as diagnostic and operative hysteroscopy for abnormal uterine bleeding, polyps, submucous fibroids and intrauterine adhesions. He/she is expected to become proficient in endoscopic suturing to safely and in a timely manner conduct reconstruction of the uterus following laparoscopic myomectomy. He/she should be able to perform all varieties of laparoscopic hysterectomy (LAVH, TLH, LSH, and robotic hysterectomy), treat stage IV endometriosis and select, evaluate and manage patients with adnexal masses by laparoscopy when indicated. He/she should be able to identify and manage complications following hysteroscopy and laparoscopy and obtain the appropriate consultations where indicated.

During the Pelvic Reconstructive Surgery rotation, the fellow should become familiar with the evaluation and management of patients with pelvic floor disorders. He/she will assist in pre-operative assessments, urodynamic testing and pelvic reconstructive surgery.

The fellow will be required to perform research and publish at least one paper on a topic relevant to Gyn endoscopy prior to completion of the fellowship. The ultimate goal of the fellowship is to train academic gynecologists to become expert clinicians and teachers of gynecologic endoscopy.

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Faculty: Michael Hibner, MD, Ph.D., Raymond Shamoss, MD, Ali Borhan, MD, Ketan Patel, MD, Jan Watson, MD, David Greenspan, MD, Joyce Huang, Ph.D.

2-year Program

Description: The fellowship at St. Joseph's Hospital and Medical Center in Phoenix Arizona is structured for the applicant entering academic medicine. Our hospital is affiliated with the University of Arizona College of Medicine and Creighton University School of Medicine. The program has a strong emphasis in minimally invasive surgery. Included in the curriculum are rotations in advanced laparoscopic and hysteroscopic surgery, as well as advanced abdominal and vaginal surgery. In addition, fellows will have exposure to the latest advances in robotic surgery. Fellows will be trained in cystoscopy, ureteral stenting, ureteral reimplantation as well as laparoscopic bowel surgery. Surgical experience will be at St Joseph's Hospital, a freestanding ambulatory surgical center and office-based procedures. Upon graduation, fellows will be qualified to serve as a minimally invasive gynecologic surgery consultant.

Fellows will also have clinical exposure to the chronic pelvic pain clinic at St Joseph's Hospital where they will be exposed to all areas of pelvic pain, including the diagnosis and treatment of endometriosis, pelvic congestion syndrome, extensive adhesive disease and pudendal neuralgia.

Fellows will rotate with laparoscopic general surgeons and laparoscopic urological surgeons. Fellows will rotate with the Department's gynecologic ultrasonographer, and will be required to be knowledgeable in diagnostic gynecologic ultrasound and perform procedures, including, ultrasound guided aspirations and biopsies.

Fellow will be encouraged to do one basic science research project under the supervision of Dr Huang (Director of Research), and will be required to do one clinical project under the supervision of the faculty. The clinical project will be presented at AAGL annual meeting.

Fellow will be required to teach Obstetrics and Gynecology residents. Fellow will also be responsible for weekly Gynecologic Surgery conference. Fellow will prepare two Grand Rounds presentations during their Fellowships.

Fellow will be required to present at the annual meeting of AAGL. Alternatively SGS (Society of Gynecologic Surgeons), AUGS (American Urogynecological Society) or ACOG presentation will be accepted.

Fellow will attend courses in epidemiology, research design and biostatistics. This will be arranged for by Medical Education Office at St Joseph's Hospital in conjunction with Arizona State University.

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Faculty: Faculty: Keith Isaacson M.D., MD; Peter Rosenblatt M.D.; Tony Disciullo M.D.; Roger Ferland M.D.

1-Year Program

Description: The fellowship program in Gynecologic Endoscopic Surgery is primarily based at Newton Wellesley Hospital where the fellow will participate in educational and clinical activities related to advanced hysteroscopic and laparoscopic surgery. Here the fellow will interact with PGY-3 residents from the Massachusetts General Hospital (MGH) and Brigham and Women's Hospital (BWH) combined program and have responsibility for teaching in the skills lab, the animal lab and in the operating room. The fellow will operate with Dr. Isaacson and private practitioners at Newton Wellesley Hospital and MGH. The fellow will spend at least one operating room day per week with urogynecologists Drs. Peter Rosenblatt and Tony Disciullo at Mt Auburn Hospital and one day a week performing advanced endoscopy at Brown University with Dr. Roger Ferland.

The clinical research opportunities are plentiful. The fellow will be involved in CIMIT (Center for Innovative Minimally Invasive Therapy), a conglomerate of Harvard Medical School, MGH, BWH, NWH, MIT, the federal government and industry. There is an active research program involving surgical simulation and education, prevention of medical errors and the operating room of the future. The fellow will also have the opportunity to participate in urogynecologic clinical studies and studies at Brown University with Dr. Ferland. The fellow will have the opportunity precept students in cadaver lab courses sponsored through the New England Association of Gyn Laparoscopy held 3-4 times per year.

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1-Year Program

Description:

The practice specializes in advanced laparoscopic surgery in the following areas:

- Reproductive microsurgery by laparoscopy including tubal anastomosis, neosalpingostomy, myomectomy, ovarian cystectomy
- Hysteroscopic surgery
- Total laparoscopic hysterectomy including difficult and large uteri
- LSH endometriosis surgery including enbloc deep and peritoneal resection, bowel, bladder, ureteric resection and anastomosis/repair
- Advanced adhesiolysis, enterolysis, frozen pelvis
- Pelvic support procedures including sacrocolpopexy, uterosacral suspension, burch, paravaginal repair etc.

There is opportunity to assist the reproductive urologist and general surgeon in bowel resection procedures. The program looks to train gifted surgeons with an interest in innovation and analysis including publication.

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1-Year Program

Description: Sunnybrook and Women's College Health Sciences Centre is a teaching facility that is associated with the University of Toronto. Because our facilities and the number of competent laparoscopic pelvic surgeons, we are able to offer a diverse and intense one year fellowship program. Hopefully, when an individual finishes their fellowship training, they will be able to act as a resource person in their own institution and build up a minimally invasive surgery program. We hope to expose the Fellow to as many difficult cases as possible within a 12-month period with various staff surgeons who are proficient in these procedures themselves. This will enable him or her to rapidly move up along the learning curve with the idea that eventually the fellow will be sufficiently proficient technically to perform procedures with senior residents assisting. We will be able to offer a fellowship that includes advanced laparoscopic surgery in the areas of urogynecology and pelvic reconstruction, endometriosis and infertility, alternatives to hysterectomy (e.g., myomectomy), and bowel surgery.

The typical weekly schedule will consist of the following:

- (1) 3-3.5 days in the operating room learning advanced laparoscopic and hysteroscopic surgery.
- (2) 0.5-1 day in the REI clinic assessing women with endometriosis, infertility, leiomyomas or in the Urogynecology Unit assessing women with incontinence and/or prolapse. This would include training in transvaginal, transvesical ultrasound, multi-channel urodynamics, cystoscopy and hysteroscopy.
- (3) 0.5-1 day of protected time to research. The fellow will be supervised to complete a research project of their choice within the year. The fellow will be able to attend various Clinical Epidemiology and Biostatistics courses held by the University of Toronto throughout the academic year and may enroll in the diploma in Clinical Epidemiology.
- (4) 16 hours (8 sessions) spread out over the year will be spent in teaching junior residents in the Surgical Skills Lab on principles of laparoscopic surgery, hysteroscopic surgery, electrosurgery and LASER.

The fellow may be asked to cover sperm wash patients or perform IUI on the occasional weekends when the staff is unavailable. As well, they be expected to cover for patients who may come to ER as a result post operative complications. They are not expected to cover any Obstetrics.

Please note: Attached is a form that is a University of Toronto requirement which essentially means that if the applicant fails to meet the skill level of a Canadian graduate by the end of 4-12 weeks then they will be asked to leave the program. [Click here to view the form.](#)

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2-Year Program

Description: The fellowship at Magee-Womens Hospital/University of Pittsburgh Medical Center is a two-year intense academic training program in gynecologic minimally invasive surgery. The fellow will benefit from the expertise, experience, and surgical volume of five faculty members dedicated to minimally invasive surgery with specialty and fellowship training in REI and MIS. The fellowship was expanded to two years to allow the fellows to obtain a certificate in either clinical research or medical education through University of Pittsburgh's Institute for Clinical Research Education (<http://www.icre.pitt.edu/degrees/degrees.html>).

With the inclusion of the Certificate Program, the fellows will now have the necessary clinical skills and research training for a productive academic career.

Depending on the fellows' course work and year of training, their schedule will be variable. Their time will be divided between:

- Office sessions with MIS faculty – The faculty in the MIS program has a large referral practice, and under the guidance of a faculty member, the fellows see new patients referred for surgery. The focus of these office sessions will be on proper pre-operative evaluation and decision-making. At the completion of their training, the fellows will be proficient in: the multi-system approach to the evaluation of chronic pelvic pain/endometriosis, the proper evaluation of pelvic organ prolapse and incontinence, and the minimally invasive management of common gynecologic complaints (i.e. fibroids, adnexal masses, abnormal uterine bleeding).
- Operating Room – The fellows participate in all laparoscopic and hysteroscopic procedures brought to the OR by the faculty of the MIS program. Their primary responsibility is to acquire advanced surgical skills through hands-on experience, and secondarily we expect them to be teachers to the residents in the OR. Over the course of the two years, the fellows will spend on average three days a week in the OR.
- Course Work – 15 credits are required to complete the Certificate Program (<http://www.icre.pitt.edu/degrees/degrees.html>). The majority of the credits will be obtained in the first two months of fellowship. The remainder is to be completed over the next one to two years based on the track chosen by the fellow. All class time is protected, and the fellows have no clinical responsibilities that will interfere with their course work.

Completion of the master program in clinical research or medical education is optional and can be accomplished with prior approval of the fellowship director.

Academic time – This has been set aside so that the fellows will have protected time to pursue:

- o Resident education – the fellows are responsible for the monthly MIS conference (which comprises case presentations, in-depth discussion of various MIS related topics, and surgical tutorials), laparoscopy trainer (we have a dedicated room with multiple laparoscopy trainers which allows the fellows to review basic and advanced skills, such as laparoscopic suturing), and the pig lab (this lab is run once every 5-6 weeks and allows the fellows to review laparoscopic skills in a realistic setting).
- o Research – the fellow will have ample opportunities for multiple research projects. Protected research time is granted. Through our association with the Magee-Womens Hospital Research Institute and our extensive patient database, the fellow will be able to design and execute prospective and retrospective trials under the mentorship of the program faculty.
- Independent office sessions – The fellows will see patients independently and with residents in the Minimally Invasive Surgery Clinic. This is an opportunity for the fellows to evaluate and schedule patients for surgery on their own. During the first year of fellowship, a faculty member will staff the fellow's cases. In the second year, the fellows will have their own block time to perform cases independently with faculty back up. This will be in addition to the time spent in the OR with the MIS faculty, and not as a replacement.
- The fellow will have minimal gynecology call responsibilities but no obstetric responsibilities.

Due to the varied backgrounds of the faculty in the MIS program, fellows will graduate well versed in all of the following procedures:

- Laparoscopy
 - o Hysterectomy (total and supracervical)
 - o Myomectomy
 - o Excision of endometriosis (including radical pelvic sidewall dissections and bowel surgery for the frozen pelvis)
 - o Presacral neurectomy
 - o Prolapse repair/Pelvic reconstruction (sacralcolpopexy, uterosacral vaginal vault suspension, paravaginal defect repair)
 - o Incontinence (Burch retropubic colposuspension)
 - o Infertility (fimbrioplasty)
 - o Treatment of vaginal agenesis and other Mullerian anomalies
- Hysteroscopy
 - o Resection of submucosal fibroids
 - o Endometrial Ablation
 - o Synechiolysis

Our expectation is that at the completion of the fellowship, the fellow will be an extremely qualified minimally invasive surgeon, and that they will pursue a career in academic medicine and train future generations of pelvic surgeons.

Fellows are hired as full-time University faculty and have all the rights and privileges that go along with the position. Salary is at the PGY-V level the first year and PGY-VI the second. Health insurance and other benefits are the same those offered to all full-time faculty. Malpractice insurance is occurrence-based and covered by the University.

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1-Year Program

Description: The Gynecologic Endoscopy Fellowship at the Albert Einstein College of Medicine (AECOM)/ Montefiore Medical Center (MMC) is an academic training program which offers wide exposure to advanced endoscopic surgery and a state-of-the-art minimally invasive surgery facility for research and training.

Fellows will be exposed to a wide variety of experiences during their training. The Department of Obstetrics & Gynecology and Women's Health at AECOM/MMC has one of the largest residency training programs in the United States (36 residents), as well as fellowship programs in every subspecialty of obstetrics and gynecology (ob/gyn). In addition to routine laparoscopic procedures, specialists from each Division will participate in the education of the advanced endoscopic fellow who will have exposure to procedures such as laparoscopic cancer staging and lymph node dissection, TVTs, laparoscopic retroperitoneal procedures and vault suspensions, laparoscopic tubal reanastomosis, and resection of endometriosis. Furthermore, the Department of Surgery, which has its own laparoscopic fellowship, has agreed to allow our fellow to rotate through their Division to be exposed to bowel resections, cholecystectomies and bariatric surgery. Advanced hysteroscopic procedures including myoma resection and endometrial ablations are also routinely performed.

Requirements of the fellowship include successful completion of a biostatistics course and performance of research during protected time that will culminate in publication in a peer-reviewed journal. The advanced endoscopic fellow will play a large role in the teaching of laparoscopic surgery to ob/gyn residents.

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1-Year Program

Description: Our practice is limited to laparoscopic surgery, and we operate three full days per week (Monday, Tuesday, and Friday) when I am in town. Our practice is basically a referral practice, therefore, the majority of our cases are considered as complicated to extremely complicated. We have a state-of-art endoscopic surgical suite at East Ridge Hospital where we do practically all our surgeries. We do our own bowel resections, ureteral surgery, including ureteral resection and reanastomoses, and bladder surgery for severe endometriosis or surgical injury.

Our special interest is in the field of laparoscopic management of urinary incontinence and pelvic floor reconstruction for the genital prolapses. We have performed a large number of laparoscopic enterocele repair, vaginal vault/uterovaginal suspension, retroperitoneal paravaginal suspension, Burch colposuspension, suburethral sling procedure (we use patient's own fascia lata exclusively). We have also performed TVT on some selected patients. We have had a fellowship program in Advanced Gyn. Endoscopic Surgery for the past seven years and at end of his/her fellowship training, he/she would be exposed to at least 350 major complicated laparoscopic surgeries. Upon finishing their training, we expect them to be very good in laparoscopic surgical pelvic anatomy, proficient in laparoscopic suturing and knot tying, comfortable in identifying and dissecting all major pelvic structures in difficult and complicated cases. They would also know how to avoid and manage complications laparoscopically.

NOT ACTIVE FOR 2008-2009

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2-Year Program

Description: The Center for Fertility and Women's Health, P.C. is located at New Britain General Hospital (100 Grand St, New Britain, Ct. 06051) and at Hartford Hospital (85 Seymour St, Hartford, Ct. 06106). It is staffed by 2 board Certified REI specialists (Anthony a. Luciano, M.D. and Linda Chaffkin, M.D.), a nurse practitioner, manager, clinical research coordinator, 3 nurses, billing specialist, 2 laboratory technicians, receptionists, and physician assistants.

The practice specializes in infertility, advanced endoscopic surgery, reproductive endocrinology, including menopause, osteoporosis and sexual health. The practice is actively involved in clinical research, on adhesion prevention, management of menorrhagia associated with uterine fibroids, menopausal symptoms and sexual health.

The director of the fellowship program, Dr. Luciano, performs 5-7 cases of advanced laparoscopy and hysteroscopy per week to treat infertility, pelvic pain, abnormal bleeding, endometriosis, fibroids, pelvic adhesions, congenital Muellerian anomalies. Most of the cases are referred by gynecologists and primary care physicians, and most of them are complicated surgical challenges.

The Center for Fertility and Women's Health has a well-established reputation in Connecticut and the North East as a referral center for advanced endoscopic gynecologic surgery. During the past 2 years, Dr. Luciano alone has performed well over 500 advanced laparoscopic and hysteroscopic procedures.

The Fellow will work as part of a team with preceptors, residents and medical students. The center has available a laparoscopic training station for trainees to practice endoscopic techniques, suturing etc. Trainee will be responsible for at least 2 lectures to be given to residents on anatomy and endoscopic complications.

Electives - Fellow will rotate at least 2 weeks with urogynecology group (Drs. LaSala and Toulikangas) and with Dr. Farr Nezhat, gyn oncologist at Mt. Sinai Hospital in New York City

Dr. Luciano lectures the residents and medical students every Monday from 7:00-8:00 AM on REI and endoscopy topics. Throughout the academic year we cover all aspects of REI and Gynecologic endoscopic surgery, including the physics and applications of power sources, pelvic anatomy as viewed at laparoscopy, laparoscopic complications, etc. The fellow will be attending these lectures and will be responsible for the preparation and deliverance of several of these lectures. Once a month the fellow will participate in the departmental journal club, will attend didactic lectures for residents and fellows every Tuesday and Friday morning (7:00-7:45 am), departmental grand rounds every Wednesday.

The program will provide ample opportunity for clinical experience In the O.R. and clinic, extensive exposure to didactic conferences and case discussions, and opportunity for research. The practice will pay for tuition to take a postgraduate course in statistics at the graduate School of Public Health of the University of Connecticut. At the completion of the fellowship training program, the fellow will be well prepared to perform advanced laparoscopic and hysteroscopic surgery in the management of reproductive disorders, including:

- Hysterectomy by laparoscopy and vaginally
- Myomectomy by laparoscopy, hysteroscopy and abdominally
- Laparoscopic treatment of advanced endometriosis, including pelvic sidewall dissection, ureterolysis, resection of bowel and bladder endometriosis
- Infertility surgery, (adhesiolysis, fimbrioplasty, tubal anastomosis)
- Presacral neurectomy, uterine suspension, uterosacral plication
- Burch retropubic colposuspension
- Hysteroscopic myomectomy, septolysis, synechiolysis, endometrial resection/ablation.

The fellow will be actively involved in clinical research with 2 half days of protected time for data collection, analysis and publications. She will be enrolled in a postgraduate course in Biostatistics in the graduate School of Public Health at the University of Connecticut.

NOT ACTIVE FOR 2008-2009

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Faculty: Dr. Tom Lyons - Primary faculty. Dr. Robert Albee, Dr. Barry McKernan, Dr. John Miklos - Ancillary faculty.

1-Year Program

Description: This fellowship program focuses on the diagnosis and management of gynecologic disease using the latest in minimally invasive techniques. Pelvic ultrasound is emphasized in diagnosis along with other innovative tools. Laparoscopy and hysteroscopy are the therapeutic options available surgically. The percentage of pathology are as follows: endometriosis 60%, leiomyomata 20%, pelvic floor reconstruction 15%, and oncology 5%. At the end of the program the fellow should be able to perform LAVH, LSH, LH, Lap myomectomy, Lap excision of endometriosis. Lap pelvic floor reconstruction, basic retroperitoneal dissection, hysteroscopic resection/ablation, hysteroscopic myomectomy, and other more basic techniques.

The center performs about 250 minimally invasive major surgical procedures per year and the fellow would be involved in these in addition to seeing a small group or patient on their own. During the year I expect that the fellow will write or participate in 2-3 scholarly papers as well as teaching students and residents that may be visiting in our center. The ancillary faculty members are well known laparoscopic surgeons in the area who may consult on our patients and will be available for educational experiences during the year. This fellowship was the first that was established and accredited by AAGL and for the last 5 years has been successful in training competent gyn endoscopists for work in our communities. The fellowship is sponsored by an educational grant from Ethicon EndoSurgery.

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One-Year Program for Gynecologic Oncologists.

Description: To be provided at a later date.

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Clinical Professor of OB/GYN & Surgery
President Elect, Vice President of Society of Laparoscopic Surgeons
Consultant Surgeons:
MYRIAM J. CURET, M.D. FACS., HARCHARAN S. GILL, M.D. FACS,
RALPH S. GRECO, M.D. FACS., WM. LEROY HEINRICHS, M.D. PH.D.,
CEANA H. NEZHAT, M.D., FACOG, FACS, FARR R. NEZHAT, M.D., FACOG, FACS
CHRISTOPHER K. PAYNE, M.D., FACS, ANDREW A. SHELTON, M.D., FACS,
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1-Year Program

Description: The fellowship is a gynecologic endoscopic fellowship under the direction of Dr. Camran Nezhat along with other faculties and consultants whom include, Farr Nezhat M.D. FACOG, FACS, Ceana Nezhat M.D. FACOG, FACS, Wm. LeRoy Heinrichs, M.D., Ph.D., Myriam J. Curet M.D. FACS, Harcharan S. Gill M.D. FACS, Ralph S. Greco M.D. FACS, Christopher K. Payne M.D. FACS, Andrew A. Shelton M.D. FACS, Mark Welton M.D. FACS, Richard White M.D. FACS and Christopher K. Zarins, M.D., FACS. The setting is The Center for Special Minimally Invasive Surgery, Stanford University Hospital, and Stanford University Medical Media and Information Technologies (SUMMIT), Palo Alto, CA. The primary training goal is improving patient care and to teach advanced endoscopic operative skills to individuals who are interested in propagating the field of endoscopic pelvic surgery. A secondary goal is to contribute new knowledge about learning and teaching with advanced surgical trainers.

The surgical experience includes operative hysteroscopic techniques in dealing with uterine anomalies, intrauterine fibroids, polyps, septum, tubal obstruction and adhesions, bleeding etc. The laparoscopic training includes understanding and treating advanced endometriosis. This includes ovarian, peritoneal, GI, GU endometriosis and other extra-genital endometriosis. Role of laparoscopy in hysterectomy will be thoroughly thought. The fellow will also learn the disciplines of approaching and treating fibroids, infertility pathology, ovarian pathology, and urogynecologic procedures for incontinence and pelvic reconstruction and also gynecologic oncology. In addition to laparoscopic procedures the fellow will become proficient in ultrasonography, cystoscopy, stent placement, and proctoscopy. A unique feature of this program is the availability of laparoscopic and hysteroscopic virtual reality simulators that provide force feedback (haptics), which helps in improving surgical skills and developing teaching skills. Fellows will spend time in the lab to further their training on anesthetized animals.

Research plays a significant role in advancing medicine and improving patient care. Fellows are encouraged to participate in technical innovation for the advancement of minimally invasive surgery and surgical education and training. The fellowship includes both advanced clinical and basic science research opportunities at Clark research center. All fellows are expected to be productively involved in the writing and research experience. These include abstracts, poster presentations, video presentations, journal publications, grants, and experimental designs. This is a 1 to 3 year program. The decision to offer an extension is made at the end of the first year. There are 40 to 50 applicants per year. The applicants are chosen from AAGL/ASRM and direct applicants.

The week is usually organized as one day clinic and 4 days of OR. There are in average 2-3 cases per day. The fellows are required to attend OB/Gyn grand rounds on Mondays and General Surgery grand rounds on Tuesdays during the academic calendar. Other educational activities are encouraged out of the medical school and the university.

Fellows have opportunities to rotate through Mount Sinai School of Medicine, Mount Sinai Medical Center, New York, NY with Dr. Farr Nezhat and The Nezhat Medical Center P.C., Atlanta, Georgia with Dr. Ceana Nezhat.

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1-Year Program

Description: The fellowship is a one-year program focusing on clinical and research activities under the direction of Dr. Ceana Nezhat. Dr. Nezhat usually operates every morning Monday through Friday and sees patients at the clinic from 12:30 until 5:30 pm. This is a private practice and is mostly referral based. Endometriosis, myoma, infertility, and congenital abnormalities are the focus of surgical cases. Metabolism, and endocrine disorders, menopause, as well as PCOS and recurrent pregnancy loss are covered during the clinic hours. The fellow will be exposed to a wide range of advanced endoscopic procedures, including: operative laparoscopy, hysteroscopy, cystoscopy, and sigmoidoscopy. The fellow will become familiar with multidisciplinary approaches to complicated cases and will have a rotation in urology and colorectal surgery.

In addition to the clinical experience, adequate time and advisement is allotted to research and educational activities. It is recommended for the fellows to participate in the workshops directed by Drs. Nezhat. This can prepare the fellow for operating, lecturing, and instructing the workshop participants in the OR and laboratory settings. The fellow will be expected to produce a variety of teaching and research materials including abstracts, journal articles, book chapters, lectures/presentations, and teaching videos. In the recent past, our fellows have assisted in journal article publications and the production of award winning videos for national meetings. The fellow will also be encouraged to attend national meetings, become active in organizations promoting the advancement of women's health, and to provide community outreach through teaching locally.

FARR R. NEZHAT, MD, FACOG
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1- Year Program

Description: The fellowship program in Gynecologic Endoscopic Surgery at The Mount Sinai Medical Center is a one-year comprehensive program incorporating clinical, research and educational activities. The fellow will acquire skills in advanced hysteroscopic and laparoscopic procedures for benign conditions like fibroids, adnexal mass, endometriosis, DUB, various urogynecologic procedures, etc. The fellow, due to the nature of the practice, will also have exposure to certain gynecological malignancies and will have the opportunity to assist in laparoscopic staging and radical surgery for gynecologic malignancies. They will also gain experience in robotic assisted procedures. The fellow will be involved in several research projects and will be expected to present at scientific meetings.

The fellow will participate in the Women's Gynecologic clinic in consultative service. Teaching activities will include resident instruction in endoscopic techniques using an advanced skills laboratory and supervision of basic endoscopic procedures. Participation in departmental grand rounds, didactic educational programs, and weekly conferences is expected.

Upon completion of this fellowship, the fellow should be able to confidently perform most advanced laparoscopic and hysteroscopic procedures and be eminently qualified to continue on in academic medicine in a supervisory capacity.

JAMES M. SHWAYDER, M.D., J.D.
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RESAD PASIC, M.D., PH.D.
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1-Year Program

Description: Program Description: The fellowship in Gynecologic Endoscopic Surgery at the University of Louisville, Louisville, Kentucky is a one-year academic program. The program not only incorporates the fellow in the university setting where they are involved with the teaching of residents, but also involves a rotation through a very active private practice in Operative Endoscopy. The entire gamut of endoscopic surgery will be experienced by the fellow including training in urogynecologic procedures and pelvic reconstruction. The fellow will also have the ability to attend and to work in the cadaver laboratory. This experience in teaching residents anatomy on the cadaver by laparoscopy is an outstanding and unique opportunity. During the one year, the fellow will attend a biostatistics course that is taught at the University of Louisville and will participate in academic conferences. During the year the fellow will be expected to participate in an independent research project that is expected to be published in a peer reviewed journal at the culmination of their year. At the end of this fellows training, they should be able to confidently perform most advanced laparoscopic and hysteroscopic procedures and be eminently qualified to continue on in academics in a supervisory capacity.

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1-Year Program

Description: The Fellowship in Gynecologic Endoscopy at Halifax Medical Center is a one year program designed to offer the fellow a comprehensive experience incorporating clinical, educational, and research opportunities. The fellow will work closely with faculty from the departments of gynecology, general surgery, gyn oncology, and urology.

Mornings are reserved for the operating rooms at either of Halifax's two major facilities. Two mornings are earmarked for gynecologic laparoscopy; the most commonly performed procedures are LSH, TLH, and laparoscopic evaluation and treatment of pelvic pain. Two mornings will be used for general surgery experience, typically laparoscopic hernia repair with mesh and bowel procedures. One day will focus on robotic surgery either in the treatment of gynecologic cancer or pelvic prolapse.

The afternoons will typically be a combination of office evaluation and urodynamics/cystoscopy/hysteroscopy clinics. The fellow will supervise a family practice resident gyn clinic at least one afternoon during the week. Medical student teaching and contributions to scheduled didactics are also expected.

Research time is one half day of protected time; the opportunities for clinical research are numerous and members of the faculty are available to assist with the design and logistics of successful investigation.

Although the 2008 position is the first fellowship offered at the Halifax facility, we are confident that we have developed a vibrant program that will provide a strong year of surgical training.

JOHN F. STEEGE, M.D., Professor
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2-Year Program

Description: The purpose of this university-based program is to prepare clinicians for careers in academic medicine, with clinical, research, and teaching responsibilities in the areas of minimally invasive gynecologic surgery, and in pelvic pain. We established the first fellowship in the country to offer in depth training in both of these areas. Of the eight graduates of the fellowship to date, seven have remained in academic medicine, and two have obtained NIH grants to support their research.

Surgical experience includes participation in approximately 400 cases annually, including all benign gynecologic problems. Our referral base has been well established for 25 years, and includes the entire range of gynecologic pathology, including vulvar disease, endometriosis of all stages, fibroids, and adhesions. Robotic myomectomy and other robotic surgery started in 2005 and is rapidly growing. Fellows are in the operating room 2 days per week.

Outpatient clinical training includes well-mentored experience in the management of difficult gynecologic disorders, including assessment and management of vulvar and pelvic pain, employing pharmacologic, counseling, and physical therapy approaches predominantly. Fellows have the opportunity to rotate through pain clinics in anesthesia, neurology, gastroenterology, and alternative medicine.

Teaching responsibilities will include regular interaction with residents as well as fellows in other gynecologic subspecialties, and attendance in a weekly journal club. Fellows function as junior attendings in this role.

Fellows will also participate in the Masters in Clinical Investigation program offered by the School of Public Health at UNC, one of the top schools of public health in the country. Courses in this program will prepare the fellow for participation in clinical research at a leadership level. Participation in ongoing research in the division, as well as development of a new project, will be part of this educational process, and will lead to national presentations and publication in peer-reviewed journals. For additional information, please look at our website, at www.uncobgyn.org, or call.