Fellowship Training in Gastroenterology

Information for Applicants
Training beginning July 1, 2016
April 17, 2015

Dear Applicant:

Thanks for your interest in training at the University of Kentucky. At just a little more than fifty years old, the University’s Medical Center is young by some standards. But a half-century of dedication to excellence has created a health care center that’s second to none. We’re proud that our Digestive Health Program is one of the engines that have propelled that excellence; and at the heart of our mission is the gastroenterology fellowship program. We truly believe that dedication to educational excellence is an essential part of who we are, and in a fundamental way our education program drives our clinical excellence. We hope you’ll see in these pages how we’ve worked to carefully craft a training program that achieves such high standards.

For more information about our gastroenterology training program, please visit our web site at https://internalmedicine.med.uky.edu/fellowship-3 where you’ll also find information and links to apply for a position. Or feel free to contact me personally at 859.323.4887 or nickl@uky.edu.

We look forward to reviewing your application.

With best regards,

Nicholas Nickl MD
Professor of Medicine
Fellowship Program Director
THE PROGRAM

As the final launch pad for your professional life, your fellowship training may be the most important decision of your career. Making the right choice usually starts with a thorough examination of the day-to-day structure of the program. While somewhat of an oversimplification, it can be said that most of our fellows’ everyday educational experiences fall into three categories: clinical work, didactic learning, and research.

Clinical Experience

The Venues
Fellows work at three different hospital settings, all of which are located on the UK campus. Each setting provides a unique flavor, but with different environments, different facilities, and different patients. The result is a well-rounded experience with a wide breadth of clinical exposure, but which maintains a unity of character due to the close geographic proximity of the three facilities. And all three facilities are staffed by our full-time GI faculty who supervise all services and endoscopy.

UK Chandler Hospital
The primary training venue is Kentucky’s flagship medical center, the Albert B. Chandler Hospital. UK Chandler is a traditional academic tertiary-care medical center, and serves as the major referral center for all of central and eastern Kentucky. All physicians with admitting privileges at UK Chandler are members of the UK teaching faculty. As of this writing, UK Chandler is in a state of transition. The new hospital, designated Pavilion A, has been opening in stages since in 2010, with new floors and facilities scheduled to open periodically through 2018. Meanwhile, the old hospital (Pavilion H) continues to be used for much patient care but will diminish as additional programs move to the new facility. The two buildings are immediately adjacent and internally connected so patient care services continue to function smoothly during the transition years. The Endoscopy Center is a 7000 square foot facility opened in 1995, and thanks to forward thinking in its design it continues to function smoothly despite strong growth in both volumes and case complexity since then. Routine as well as advanced procedures are offered, particularly including very active programs in ERCP and EUS. As the first EUS center in Kentucky, the EUS program has maintained steady
growth with high volumes of common and advanced EUS procedures. Likewise, UK remains the referral center of choice for the region in all types of ERCP procedures, and is the only center where many advanced ERCP procedures are offered. Space has been designated for a new Endoscopy Center in Pavilion A, and plans are underway to construct a state-of-the-art facility in that location.

Also located within the Chandler campus is an ambulatory care complex which includes the gastroenterology outpatient clinics. All fellows maintain a once-weekly half day continuity care clinic, where a balance of both primary and advanced gastroenterology patients is seen. All types of patients are scheduled for fellows (e.g. fellows do not see only specific types of pathology or specific payer status) and strictly controlled volume caps prevent overloaded fellow clinics, permitting a good learning experience. In response to fellow feedback, we are presently revising our clinic format to increase faculty supervision and teaching in the outpatient arena, with direct supervision of clinics by faculty who are dedicated to fellow teaching. Staff attendings are rotated every 6 months so that the fellows are exposed to a broad variety of teaching styles and content during their 3 years.

**UK Good Samaritan Hospital**

At the north end of UK’s campus is Good Samaritan Hospital. While Good Samaritan is smaller than Chandler, it offers the same level of clinical and academic excellence in a community hospital setting. Patient acuity is somewhat less, although the range of educational pathology makes this a favorite rotation for fellows. They especially enjoy the fact that the somewhat slower pace permits more prolonged patient contact and greater depth of reading and study. A new endoscopy suite opened in 2013 to provide a full range of services, and of course complete tertiary-level care is available just minutes away at Chandler. Finally, a continuous shuttle bus system permits easy staff travel between the hospitals, so that fellows and faculty remain fully integrated into the complete range of Divisional activities without feeling isolated or remote. One or two faculty members maintain continuity outpatient clinics at Good Samaritan’s office building, and some fellows occasionally see patients there with faculty physicians.

**Lexington VA Hospital**

Hospitals of the Veterans Administration have long been a cornerstone of academic medicine in the US, and Lexington’s VA hospital is fully engaged in our educational program. The VA hospital is situated within UK’s campus and physically joined to the Chandler hospital complex. A referral hospital within the VA system, Lexington’s VA has a full range of inpatient and outpatient services. Contract affiliations with UK mean
that all the tertiary-level health services at Chandler are immediately available. The VA has a full-service endoscopy suite which includes all routine procedures as well as ERCP and EUS, and the outpatient facility, where fellows maintain a weekly continuity clinic, provides an excellent environment for patient care and teaching. Faculty physicians are assigned on a rotating basis to staff all outpatient visits at the VA hospital each week.

The Rotations
Each rotation is 4 weeks. The number of blocks during the 3 year fellowship for each rotation is carefully controlled to ensure that all fellows receive a broad range of experiences.

**UK Gut Consults**
Fellows see and follow in continuity GI inpatient consults related to non-hepatology conditions at UK Chandler Hospital. The team includes one or more internal medicine residents and an assigned attending. Daily work and teaching rounds are conducted, and the fellow participates in all endoscopies for those patients.

**UK Liver Consults**
Fellows see and follow in continuity GI inpatient consults related to hepatology conditions at UK Chandler Hospital, including liver transplant patients. All work is supervised by an assigned attending hepatologist. Daily work and teaching rounds are conducted, and the fellow participates in all endoscopies for those patients.

**General Endoscopy**
Fellows perform routine outpatient endoscopy exams at the VA and both UK Hospitals daily. All endoscopy procedures are supervised by faculty gastroenterologists.

**VA Endoscopy and Consults**
Fellows perform routine outpatient endoscopy exams at the VA hospital each morning, with faculty supervision. The fellow also sees and follows in continuity all GI inpatient consults at the VA hospital. All work is supervised by an assigned attending. Daily work and teaching rounds are conducted, and the fellow participates in all endoscopies for those patients.

**GS Inpatient Consults**
Fellows see and follow in continuity GI inpatient consults at UK Good Samaritan Hospital under the supervision of an assigned attending. Daily work and teaching rounds are conducted, and the fellow participates in all endoscopies for those patients.

**Pediatrics**
Fellows spend 1-2 months, depending on interest, with our pediatric GI faculty. This rotation consists of a
combination of outpatient pediatric GI, outpatient and inpatient pediatric endoscopy, and, depending on the interest of the fellow, inpatient pediatric consultation.

**Selective**
Selective designates our “catch-all” rotation. With so many busy months dedicated to direct patient care, we added this rotation to give fellows a chance to relax the pace a bit and devote time to specific topics that might otherwise be missed. Fellows spend time in GI motility, nutrition, GI pathology, GI radiology, and GI pediatrics. Fellows complete at least three selective rotations during the fellowship. Special focused training in these areas or in other areas of interest is often arranged.

**Research**
Research productivity is essential to any successful GI training experience, and all fellows are required to submit or co-author at least one paper, abstract, or grant to a peer-reviewed forum. All fellows successfully meet this requirement. Protected time for research is provided depending on the nature of the project and time requirements. For fellows who plan to pursue a research-centered career additional months can also be designated for research.

**Didactic Instruction**

**Learning in the Clinical Setting**
Day to day learning in the clinic, at the hospital bedside, and in the endoscopy suite is the cornerstone of any gastroenterology training program. On the inpatient consult services of all three hospitals, daily teaching rounds are conducted with the designated attending and such residents or students as may be assigned. In the clinics at both UK and the VA, every patient is staffed with a faculty attending. And all endoscopy procedures at all three hospitals are directly supervised by a faculty endoscopist. Regardless of the setting, the emphasis is on formalized instruction rather than just patient care rounds.

**Teaching Conferences**
Effective learning means coupling patient bedside teaching with structured didactic conferences. These not only provide an in-depth analysis of the conditions seen in the clinical setting, but give an organized coverage of every topic which includes uncommon or atypical conditions that might not be seen in the clinic.

**GI Grand Rounds**
Our weekly GI Grand Rounds is a required conference for both fellows and faculty, and consists of a rotating conference of topics. At Fellow Clinical Conference fellows present a discussion of assigned clinical topics, with faculty oversight and concluding comments. Faculty Basic Sciences Conferences are presented by faculty members and cover an assigned list of basic sciences topics. Pathology Conference is a popular conference at which the director of GI Pathology presents a short overview of a specific disease entity followed by a review of selected interesting cases. Journal Club is a time-honored tradition in academic medicine to explore the most current medical thinking and methods for critical literature analysis.
**Core Clinical Conference**
Our other major weekly required teaching conference for fellows is Core Clinical Conference. Several principle subject headings are covered monthly: Endoscopy Conference, Inflammatory Bowel Diseases Conference, and Hepatology Conference are presented by a fellow/faculty team, emphasizing state of the art information drawn from practice guidelines and practice standards. Intermittently this Conference series also includes Nutrition Conference, GI Radiology Conference (with a designated Radiology attending), GI Motility Conference, Practice Management, and other topics.

**Research Conference**
A special multidisciplinary Research Conference is conducted monthly, involving all of the GI Division faculty and fellows along with participation from oncology, surgery, biostatistics, and other relevant specialties from across the University. Research projects in a variety of disciplines and subjects are discussed and presented.

**Gut Club**
A time-honored academic tradition in GI Medicine is Gut Club. Approximately every other month major national and international guest speakers are brought to Lexington for an evening dinner conference, and attendance by community physicians is typically robust. Most commonly these speakers also give a more academically focused GI Grand Rounds presentation to our Division the same day or next day.

**Research**
Research is a critical part of any academic GI fellowship. To ensure research productivity, fellows work in an area of research interest with a faculty mentor who guides fellow participation in one or more projects. Some fellows become involved in ongoing projects which the faculty member already has underway, and others have successfully launched and completed new independent studies. Productivity in the form of grant, abstract, or manuscript submissions to peer-reviewed fora; all fellows have achieved this, and most enjoy the experience of poster or platform presentations at national meetings.

Abundant opportunities for fellows to participate in ongoing projects are available. Division Director Dr. Terrance Barrett maintains active clinical and basic research in inflammatory bowel diseases, particularly involving epithelial stem cell activation in murine and human IBD models. Fellow involvement in these projects allow for knowledge of mucosal and molecular immunology and research methodologies for those interested in pursuing an academic career in these or other related topics. Members of the hepatology faculty also maintains active research programs in liver diseases, including a number of ongoing studies in non-
alcoholic steatosis as well as several studies of treatment in viral hepatitis. In endoscopy and advanced endoscopy, projects involving EUS and ERCP techniques are underway, including active trials of new endoscopic devices and methods. Endoscopy research tends to focus on outcomes methodologies and the impact on public health policy, and Dr. Houssam Mardini is particularly active in this area. Finally, fellows have originated a number of novel research projects, including studies involving video capsule endoscopy, colonoscopy preps, and endoscopy informed consent.

With so many active opportunities, fellows never have a problem finding a line of research to investigate.

**On-Call Experience and Work Hours**

All University of Kentucky medical training programs are fully compliant with duty hours requirements established by the ACGME. In the GI Division call is evenly divided among the fellows on a weeknight/weekend schedule. This results in about 1 night of call every other week. To ensure adequate rest on busy weekends, one fellow takes call on Friday and Sunday, and a different fellow is on call for Saturday. All call is taken from home. From an educational perspective, call provides valuable experience in all types of emergency services, particularly emergency endoscopy. All on-call services are supervised by GI faculty, and work rounds are conducted every day on the weekends. An advanced endoscopist is available 24/7 for emergency ERCPs. Duty hours are closely monitored using an internet-based database, and workloads are well within the standards set the ACGME, providing a vigorous but reasonable training experience.

**Advanced Training Options**

The UK Gastroenterology Fellowship offers training options in advanced IBD and advanced hepatology. Fellows desiring training in these areas typically become involved in additional clinical experience as well as related research projects some time during the first year or early second year. Clinical, basic, and translational research is offered in both IBD and hepatology depending on the fellow’s interests and aptitude.

For trainees who intend to pursue academic careers, a number of options are available. Formal coursework concurrent with the 3 year fellowship through the College of Public Health is available leading to an MPH; see [http://www.uky.edu/publichealth/academics/dual-degree-programs/md-mph-degree](http://www.uky.edu/publichealth/academics/dual-degree-programs/md-mph-degree). The University of Kentucky Center for Clinical and Translational Science offers abundant resources, infrastructure, and collaborations to promote clinical and translational research, along with specialized courses leading to a Ph.D. For more information, visit: [http://www.ccts.uky.edu/ccts/index.php](http://www.ccts.uky.edu/ccts/index.php). Finally, an NIH-funded Clinical Investigator training track is available for Internal Medicine residents who are committed to an academic career.

Fourth year training includes, Advanced Endoscopy (EUS and ERCP), be offered as a fourth year of post-fellowship training, and Liver Transplantation training leading to UNOS certification in transplant hepatology.
THE FACULTY

The strength of our educational program lies in our faculty, who take very seriously their educational responsibility. All faculty members participate in ongoing programs to enhance clinical, didactic, and procedure teaching. Our leadership faculty includes:

Terrance A. Barrett MD  
*Director, Division of Digestive Diseases and Nutrition*

Dr. Barrett joined our faculty in 2013 from Northwestern University in Chicago, where he had served on the faculty in Gastroenterology since 1991. A native of the Chicago area, he completed his medical training at the University of Illinois, University of Chicago, and Rush University. He is internationally recognized for his expertise in Inflammatory Bowel Disease, particularly for research in epithelial stem cell activation in IBD.

Paul Angulo MD  
*Director of Hepatology*

We are greatly saddened by the unexpected loss of our Director of Hepatology, Dr. Paul Angulo, who passed away in early 2015. Dr. Angulo was a world-renowned physician, educator, and researcher. We are presently conducting a nationwide search for a new Hepatology Director, and expect to fill the position during calendar year 2015.

Nicholas J. Nickl MD  
*Fellowship Program Director*

Dr. Nickl obtained his MD at the University of Tennessee and completed GI fellowship training at Duke University. In addition to service as Director of Endoscopy for over 20 years, he was Fellowship Director from 1990 to 2003 and returned to that post in 2011. His clinical and research interests are in advanced endoscopy, particularly EUS, and in health care delivery. He is now completing his 26th year on faculty at UK.

Deborah Flomenhoft MD  
*Associate Fellowship Program Director*

Dr. Flomenhoft is triple-boarded in Internal Medicine, Pediatrics, and Gastroenterology. She completed her residency and fellowship training at the University of Kentucky in 2002, and maintains an active clinical and research practice in Inflammatory Bowel Disease. She especially focuses her clinical activities on adolescent and young adult patients.
IN CONCLUSION

Every fellowship applicant has specific career goals and specific expectations for training. We hope we’ve provided enough information to allow you to determine if the University of Kentucky might be the right program for you. Please don’t hesitate to contact us if you need any additional information or have any questions.