



Residency Prospectus



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- Welcome from our Chair
- History and Mission of the Program
- Meet the Residency Leadership
- Meet the Residents
- Clinical Curriculum
- NYP Queens
- Conferences and Didactic Teaching
- Research Curriculum
- Current Residents' Research
- Advocacy and Electives
- Life After Residency
- Resident Life, Salary, and Benefits
- Why We Chose Weill Cornell
- Applying to Our Program

WELCOME FROM OUR CHAIR

As Chair of the Department of Obstetrics and Gynecology, I have the privilege of leading a health care team dedicated to treating individuals across their lifespan. Training the next generation of physicians is one of three primary areas of focus in our department alongside providing the highest quality of care and contributing to cutting-edge research. Our comprehensive training program aims to train residents across the full scope of obstetrics and gynecology including robust exposure to maternal-fetal medicine, gynecologic oncology, reproductive endocrinology and infertility, minimally invasive surgery, urogynecology, complex family planning and adolescent gynecology.

Our residents gain valuable clinical experience rotating through both Alexandra Cohen Hospital for Women and Newborns where we have >7000 deliveries/year and NYP 68th Street and the David H. Koch Surgery Center where >3,500 gynecology cases/year are performed. Residents also rotate through NewYork-Presbyterian Queens where high risk obstetrics and gynecologic surgery are the foci. Our Queens rotations provide trainees with exposure to one of the most diverse patient populations in America. Given our diverse patient populations, our residents are actively engaged in learning about health care delivery systems, and the profound impact of social determinants on health.

Our faculty are excellent clinicians and enthusiastic educators. In fact, a number of our faculty trained as residents at Weill Cornell Medicine and feel an even greater sense of responsibility to engage in both teaching and mentorship activities. While the majority of our residents go on to fellowship in an ABOG-approved fellowship program with the intent of continuing their careers in academic medicine, some residents happily join general Ob/Gyn practices to primarily take care of patients. All residents are encouraged to engage in research usually completing one or two projects over 4 years through a structured curriculum in research as well as ongoing mentorship from a faculty member. The research strengths in the department include translational research in oncology and immunology and clinical research in perinatal mental health, cardiovascular disease, severe maternal morbidity, and community health. Large epidemiologic databases which exist for obstetrics and ultrasound also serve as great launching pads for resident research projects.

While residency is a demanding time in every physician's journey, our program supports several initiatives to promote resident wellness. After all, residents should take advantage of being in one of the greatest cities in the world! From Broadway shows to world-class museums and the Hudson Valley only an hour away, New York City provides endless opportunities for fun and relaxation outside of work.

Thank you for taking the time to learn more about our residency program and hope to meet you soon!

Laura E. Riley, MD

Chair, Department of Obstetrics and Gynecology

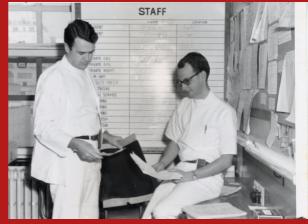
Weill Cornell Medical Center

Jama Belegia



HISTORY OF THE PROGRAM

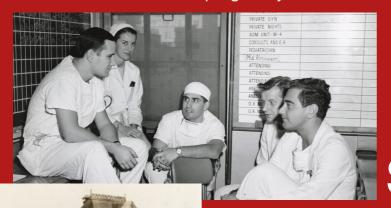
In 1898, students were welcomed to study Women's Diseases in the Department of Gynecology at Cornell University Medical College. They received their training at Bellevue Hospital, Women's Hospital, and the College's Dispensary. Separately, students received clinical training in obstetrics at Mothers and Babies Hospital in 1921, the two departments were combined to create the Department of Obstetrics and Gynecology and in 1927 Cornell University became officially affiliated with the Society of New



York Hospital in 1932, New York Hospital-Cornell Medical Center opened with Obstetrics and Gynecology as one of the five major departments.

IN 1934, A 5-YEAR RESIDENCY PROGRAM WAS ESTABLISHED FOR TRAINING OB/GYN DOCTORS.

Since then, Weill Cornell has continued to prioritize education and research. Weill Cornell was the site of the first use of laparoscopy in the country, one of the earliest family planning clinics, and the site where the home pregnancy test was developed.



MISSION STATEMENT

The Department of Obstetrics and Gynecology at NewYork Presbyterian Weill Cornell considers education of the residents to be one of our most important responsibilities.

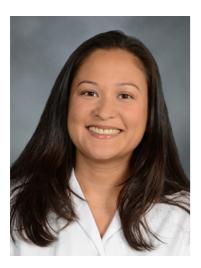
The mission of the NewYork Presbyterian Weill Cornell Ob/Gyn Residency program is to train outstanding, compassionate and inquisitive obstetrician-gynecologists who will possess the skills and knowledge to build productive and fulfilling careers as clinicians, educators, researchers and advocates.

MEET THE RESIDENCY LEADERSHIP



WING KAY FOK, MD, MS RESIDENCY PROGRAM DIRECTOR

Dr. Wing Kay Fok is board certified in obstetrics and gynecology and complex family planning, and is a Fellow of the American College of Obstetrics and Gynecology. She graduated from Cornell University and received her medical degree from SUNY Upstate Medical University. She completed her residency in obstetrics and gynecology at The Ohio State University and her fellowship in Complex Family Planning at Stanford University where she also obtained a Masters in Clinical Research and Epidemiology. Dr. Fok serves as the Ryan Residency Training Program Director, and has been at Weill Cornell since 2019.



MICHELE JEAN HAUGHTON, MD ASSOCIATE RESIDENCY PROGRAM DIRECTOR

Dr. Michele Jean Haughton is board certified in obstetrics and gynecology. She graduated from SUNY College of Geneseo and received her medical degree from Downstate Medical Center. She completed her residency in obstetrics and gynecology at SUNY Downstate Medical Center/Kings County Hospital Center. Dr. Haughton enjoys caring for women throughout their entire pregnancy, teaching medical students, and training our next generation of physicians. Additionally, she has been published in the Journal of Clinical Ultrasound and the Journal of Ultrasound Medicine. Dr. Haughton has been at Weill Cornell since 2018.



ASHLESHA DAYAL, MD

ASSOCIATE RESIDENCY PROGRAM DIRECTOR NYP QUEENS

Dr. Ashlesha Dayal is board certified in maternal fetal medicine and obstetrics and gynecology. She graduated from Boston University and received her medical degree from Boston University School of Medicine in the six year combined BA/MD program. She completed her residency in obstetrics and gynecology at Long Island Jewish Medical Center/Northwell Health and completed her MFM fellowship from Albert Einstein College of Medicine/Montefiore Medical Center. Dr. Dayal has been at Weill Cornell since 2018.

MEET THE RESIDENTS

PGY-4 - CLASS OF 2024



ALI, MD



BRITTANY DODSON, MD, MSPH



BRADY GELVIN, MD



LASKY, MD



CORBYN NCHAKO, MD



TALIA SUNER, MD

PGY-3 - CLASS OF 2025



ONYEDIKACHI ALIGBE, MD



JENNIFER VAN DYK, MD, MPH



RANA FOWLKES. MD



EMILY MILLER, MD, MPH



SAMANTHA SPRING, MD



VICTORIA WEPRINSKY, MD. MS



ETHAN WOOD, MD

PGY-2 - CLASS OF 2026



JILL ANDERSON, MD



CAROLINE CHERSTON, MD



KAITLIN CORBIN, MD



SARAH HEAPS, MD, MS



LAURA KEENAHAN, MD



CAITLIN RADFORD, MD



NATALIE SQUIRES, MD

PGY-1 - CLASS OF 2027



SAUNDRA ALBERS, MD



SPENCER DARVEAU, MD



JULIE DEAN, MD



AMANDA LEUNG. MD



SABRENA MYERS. MD. MS



MAYURI PATEL, MD



HANNAH PEIFER, MD, MPH

CLINICAL CURRICULUM

FIRST YEAR

In the first year, we focus on developing a strong foundation in the core areas including Labor and Delivery and Gynecology. Interns will have the opportunity to develop basic obstetric ultrasound skills as part of the Triage/Postpartum/Ultrasound rotation.

- Benign Gynecology
- Gynecologic Oncology
- Obstetrics
- NewYork Presbyterian-Queens Hospital
- Night float
- Triage/Postpartum/Ultrasound

THIRD YEAR

In the third year, our residents have flexibility during their elective and research rotation to further explore their career interests either through research or specialized clinical training.

- Benign Gynecology
- NewYork Presbyterian-Queens Hospital
- Obstetrics
- Ambulatory Maternal Fetal Medicine
- Jeopardy
- Elective/Research
- Night Float

SECOND YEAR

Our PGY 2s continue to growth their breadth of knowledge and develop their clinical acumen by taking on additional responsibilities and through clinical exposure to various subspecialities.

- Antepartum
- Benign Gynecology
- Family Planning/Ultrasound
- Float
- NewYork Presbyterian-Queens Hospital
- Night float
- Reproductive Endocrinology & Infertility
- Urogynecology

FOURTH YEAR

Our chiefs spend their final year refining their skills and assuming the responsibility of managing each service, as they prepare to embark on their next steps, whether that is fellowship or generalist practice.

- Ambulatory
- Benign Gynecology
- Gynecologic Oncology
- NewYork Presbyterian-Queens Hospital
- Night Float
- Obstetrics

NEWYORK-PRESBYTERIAN

NYP Queens (NYPQ) is a 535 bed level one trauma center in the borough of Queens, in Flushing, NY.

NYPQ is a regional hospital with a 5 star quality rating, the only hospital in Queens with this distinction. Queens is one of the most diverse places in the country with over 70 nationalities in the borough. The population served at NYPQ is lower to mid socioeconomic status with 80% of the patients coming from outside of the U.S., and 70% identifying that English is not their primary language. Translator services are especially robust at NYPQ.

Access to care has been limited for many of our patients, and interactions with healthcare can seem transient. This may be for many reasons- low income, lack of knowledge, fear of entry into the "system" and others. Disease may be more advanced on presentation due to limited access to preventative services.

Inequities such as food insecurity, housing insecurity, immigration fear, work stress are realities that are navigated with our patients. The rewards of good care, good outcome, and positive interactions making a difference are well celebrated here!

The Cornell OBGYN resident team that comes to NYPQ is typically a five person team, and the trainees gain the opportunity of autonomous evaluation, robust gynecologic surgery, both minimally invasive and open, and complicated obstetrical issues and deliveries, all under attending guidance and supervision. Residents learn the nuances and realities of caring for the underserved and underrepresented. The total time spent at Queens represents approximately one-third of the four year residency, and the subsequent experience gained is invaluable.











CONFERENCES & DIDACTIC TEACHING

MORBIDITY AND MORTALITY (M&M) CONFERENCE

Every Monday morning, residents present patient cases from obstetrics, gynecology, gynecologic oncology and ambulatory service. Twice a year, residents present a Health Equity M&M Conference that intentionally focuses on the social influencers of health that impact patient care.

GRAND ROUNDS

Immediately following M&M Conference every Monday morning, we invite distinguished guest speakers who are leaders in our field, from across the country as well as internal faculty internal to present on a variety of topics both virtually and in-person.

GYNECOLOGY PRE-OPERATIVE CONFERENCE

Every Thursday afternoon, our gynecology and ambulatory chief residents review planned surgical cases with Benign Gynecology, MIGS, and Gyn Oncology faculty. We finish each conference with a review of a recent or topical article.

GYNECOLOGIC ONCOLOGY TUMOR BOARD

Every Friday, the residents on the Gynecologic Oncology services discuss complex patient cases with faculty along with pathology, medical oncology and radiation oncology teams.

RESIDENT DIDACTIC LECTURE SERIES

Every Friday afternoon, our residents have protected time to attend didactic lecture series, which supplement their clinical training and education. Faculty from all the divisions give lectures, and our curriculum is based on CREOG Education Objectives.

CASE-BASED ASSESSMENTS

Each year, we dedicate an afternoon to conducting case-based assessment exams of our senior residents. These exams provide them with an opportunity to experience how to prepare for their oral exams and allows residency leadership to assess areas of strength and opportunity for improvement.

SKILLS ACQUISITION AND INNOVATION LABORATORY

We take immense pride in being able to provide a full scope, comprehensive, simulation curriculum for our residents that is catered to their level of training. Divided by PGY class, residents have multiple sessions throughout the year. Among the most popular sessions are our cadaver labs and laparoscopic myomectomy simulations!

OBSTETRICS

In addition to reviewing obstetric topics during didactics, we incorporate simulation sessions that are dedicated to developing and strengthening individual skills for operative vaginal delivery, interpretation of external fetal monitoring and perineal laceration repair. Our residents also participate in annual multidisciplinary simulations for shoulder dystocia and maternal code.

QUEENS RESIDENT LECTURE SERIES

Every Wednesday morning, the residents and attendings cover foundational topics in OB/GYN, based on ACOG practice bulletins. The topic is presented, CREOG questions based on the topic are reviewed and a short oral boards style discussion is held. Residents also practice interdisciplinary simulations approximately five times per year, with an emphasis on obstetric emergencies.

RESEARCH CURRICULUM

Weill Cornell's research curriculum offers comprehensive training in research methods from the beginning of the PGY1 year. An understanding of research and the evidence base for our clinical practice is crucial to the training of all physicians, and here at Weill Cornell we aim to offer a rich and supportive environment for investigation and education. Didactic education in research methods is provided, along with active faculty mentorship, and residents are required to play a substantial active role in at least one research project across the course of residency. The goal is for residents to gain an understanding of how research projects are developed; how data are collected, analyzed, and interpreted; and how results of research projects are disseminated. Many residents choose projects based in our departmental Research Data Repository, an resource housing electronic health record data for all births at Weill Cornell from 2011 forward.

PGY-1

- Didactic lectures: Research Expectations and Milestones, Intro to Departmental Research Team, Library Services/Lit Review/Ref software, IRB Process, Introduction to the OB-GYN RDR, Statistical Services, Conducting Basic Science Research, Conducting Clinical Research: Hypotheses, and Study Design, Writing Abstracts and Preparing Posters, Clinical Research: Working with Mentors, Setting Goals and Authorship
- Research training: All residents must complete basic institutional online research training courses by the end of the PGY-1 year
- Mentor identification: All residents are assisted to choose a faculty mentor during the PGY1 year; mentors will support research progress throughout residency
- Research proposal: At the end of the PGY-1 year, all residents will give a public presentation of their research
 proposal to the entire faculty for feedback; this will include posing a research question; outlining an appropriate
 plan to answer this question; identifying content experts; and choosing a methodological approach to answer the
 question

PGY-2

- Didactic curriculum: Attendance at Department of Biostatistics introductory lecture series
- Mentors and departmental research team assist residents with IRB applications (if necessary) and residents begin data collection (if necessary)
- Residents meet with needed consultants and content experts, conduct any required literature reviews
- Research team connects residents with initial biostatistical support to plan data analysis

PGY-3

- Residents analyze data and prepare abstracts for conference submissions
- Residents present research in progress to faculty panel (Vice Chairs of Research and of Education, mentor, and appropriate content experts) in February of PGY3 year
- Mentors continue regular meetings with residents to provide support and assess progress

PGY-4

- Mentors continue regular meetings with residents to provide support and assess progress
- Presentation: Residents present findings at national conferences (ACOG, SMFM, SRI, etc.)
- Residents work with mentors to write up projects and submit to peer-reviewed journals
- Residents give final presentation of project to entire department at the The Robert Sassoon Chief Residents' and Fellows' Research Symposium in May

CURRENT RESIDENTS' RESEARCH

RECENTLY PUBLISHED RESIDENT RESEARCH

Inflammatory responses in the placenta upon SARS-CoV-2 infection late in pregnancy.

Argueta LB, Lacko LA, Bram Y, Tada T, Carrau L, Rendeiro AF, Zhang T, Uhl S, Lubor BC, Chandar V, Gil C, Zhang W, **Dodson BJ**, Bastiaans J, Prabhu M, Houghton S, Redmond D, et al.

Cascade Testing for Hereditary Cancer Syndromes: Should We Move Toward Direct Relative Contact? A Systematic Review and Meta-Analysis

Frey MK, Ahsan MD, Bergeron H, Lin J, Li X, **Fowlkes RK**, Nayaran P, Nitecki R, Rauh-Hain JA, Moss HA, Nelson BB, Thomas C, Christos PJ, Hamilton JG, Chapman-Davis E, Cantillo E, et al.

What happens in the long term: Uptake of cancer surveillance and prevention strategies among at-risk relatives with pathogenic variants detected via cascade testing.

Frey MK, Ahsan MD, Badiner N, Lin J, Narayan P, Nitecki R, Rauh-Hain JA, Moss H, **Fowlkes RK**, Thomas C, Bergeron H, Christos P, Levi SR, Blank SV, Holcomb K, Cantillo E, Sharaf RN, et al.

Do people with hereditary cancer syndromes inform their at-risk relatives? A systematic review and metaanalysis.

Ahsan MD, Levi SR, Webster EM, Bergeron H, Lin J, Narayan P, Nelson BB, Li X, **Fowlkes RK**, Brewer JT, Thomas C, Christos PJ, Chapman-Davis E, Cantillo E, Holcomb K, Sharaf RN, Frey MK.

Barriers to completion of cascade genetic testing: how can we improve the uptake of testing for hereditary breast and ovarian cancer syndrome?

Kahn RM, Ahsan MD, Chapman-Davis E, Holcomb K, Nitecki R, Rauh-Hain JA, **Fowlkes RK**, Tubito F, Pires M, Christos PJ, Tkachuk K, Krinsky H, Sharaf RN, Offit K, Lipkin S, Frey MK.

Live-Birth Outcomes Among Women With Infertility and Anti-Müllerian Hormone Levels of 0.3 ng/mL or Lower Romanski PA, **Gelvin B**, Bortoletto P, Rosenwaks Z, Kang H

Web-based tool for cancer family history collection: A prospective randomized controlled trial.

Frey MK, Ahsan MD, Webster E, Levi SR, Brewer JT, Lin J, Blank SV, Krinsky H, **Nchako C**, Wolfe I, Thomas C, Christos P, Cantillo E, Chapman-Davis E, Holcomb K, Sharaf RN.

Combining endometrial biopsy with colon cancer screening for patients with Lynch syndrome: framework for establishing a patient-centered approach to cancer screening

Ahsan MD, Miller E, Schnoll-Sussman FH, Betesh AL, Frey MK.

THE 2023 ROBERT SASSOON RESEARCH SYMPOSIUM PRESENTATIONS

Elective induction of labor in nulliparous women of advanced maternal age: a meta-analysis.

Lauryn Adams, MD, MPH

Advisor: Amrin Khander, MD

Factors impacting return to care after the Covid-19 infertility treatment suspension.

Alixandra Garic, MD

Advisor: Stephen Spandorfer, MD

Patient and provider perspectives on telemedicine utilization for gynecologic care at a teaching hospital: Are we equipped to provide the same quality of care?

Ngozi Monu, MD, PhD

Advisor: Eloise Chapman-Davis, MD

Immune response to COVID vaccine in pregnant patients on immunomodulating drugs.

Dana Clark, MD

Advisor: Malavika Prabhu, MD

Leveraging Health Information Technology to Collect Family Cancer History: A Systematic Review and Meta-Analysis.

Xuan Li, MD

Advisor: Melissa Frey, MD

The Risk of Suboptimal Response to a GnRH Agonist Ovulatory Trigger Based on The Etiology of Gonadotropin Suppression

Christine Yang, MD

Advisor: Zev Rosenwaks, MD



ADVOCACY & ELECTIVES

Advocacy

Advocacy is not one size fit all and we encourage our residents to explore how their experiences, strengths and interests can be translated into advocacy efforts, whether it be writing a letter to the editor, calling a legislator, implementing institutional

changes, or engaging in research. In addition to attending formal didactics lectures, residents engage in small group advocacy workshops. We have an Advocacy Chief who spearheads these efforts with support from the program director and department. Residents are also encouraged to attend advocacy training through ACOG Congressional Leadership Conference or District II Resident Advocacy Program.



Electives

New to our curriculum in 2023 is a dedicated elective block in the PGY 3 year. With approval from the program director, our residents can choose how to spend this time, depending on their career interests and fellowship plans. Here are some elective options that are available:

Welcome to OB/GYN Residency!

- Gynecologic oncology at Memorial Sloan Kettering Cancer Center
- Transgender health care
- Medical Intensive Care Unit
- Reproductive Mental Health
- · Complex Family Planning
- Research

LIFE AFTER RESIDENCY

CLASS OF 2023

- GYN ONC, UNIVERSITY OF MINNESOTA
- MFM, UPMC MEDICAL CENTER
- MFM, NORTHWELL HEALTH
- GENERALIST, PRIVATE PRACTICE (NEW YORK CITY, NY)
- GENERALIST, PRIVATE PRACTICE (ATLANTA, GA)
- GENERALIST, PRIVATE PRACTICE (LINCOLNTON, NC)

"My residency training at Cornell provided me amazing clinical training and helped me develop into a well-rounded physician. It also gave me the opportunities to match into fellowship in Reproductive Endocrinology and Infertility. My co-residents are an amazing group of people and I feel so lucky to have made such great life-long friends and colleagues." - Kelly McCarter, Class of 2022

CLASS OF 2022

- GYN ONC, LOMA LINDA UNIVERSITY
- GYN ONC, ST. LUKE'S UNIVERSITY WOMEN'S HEALTH
- MFM, UNIVERSITY OF TEXAS
- REI, UNIVERISTY OF COLORADO
- REI, WEILL CORNELL MEDICINE
- REI, SIDNEY KIMMEL MEDICAL COLLEGE, THOMAS JEFFERSON

"I knew going into residency that I would likely specialize and therefore wanted to go to a program whose residents historically matched very well into fellowships. Once at NYP-Cornell, the amount of robotic-assisted and laparoscopic minimally invasive surgery exposure was truly unique and special to the program. Additionally, I had a very strong interest in investigating immunohistochemistry screening for genetic variants in endometrial cancers; Cornell not only provided biostatistical support but also grant funding to allow me to conduct further research on this topic. I will always be grateful for the training I've received in residency, both clinical and research, which has certainly prepared me well for a fellowship in Gynecologic Oncology." - Ryan Kahn, Class of 2021

CLASS OF 2021

- GYN ONC, MEMORIAL SLOAN KETTERING CANCER CENTER
- MFM, NORTHWELL HEALTH
- MIGS, JOHNS HOPKINS HOSPITAL
- REI, MONTEFIORE MEDICAL CENTER
- REI, NEW YORK UNIVERSITY
- GENERALIST, PRIVATE PRACTICE (HICKORY, NC)



RESIDENT LIFE, SALARY, & BENEFITS

LIFE

The Upper East Side provides residents with access to some of the most famous cultural destinations in New York City, including the Metropolitan Museum of Art, the Guggenheim, and the Frick Collection. Additionally, you can enjoy all the food that NYC is famous for just blocks away from the hospital, especially when you are on your Queens rotation!

You will have easy access to shows on Broadway and ice skating at Rockefeller Center. Central Park is walkable from the hospital, High Line Park is a quick subway ride away, and you can even take the NYC ferry to surf and swim at Rockaway Beach.

Our program has a wellness committee that puts together events, such as a spa night and art therapy. We have also had sessions at Zumba, Soul Cycle and Rumble boxing to help us relieve stress. Every spring there is a resident only retreat where the residents select an activity to build camaraderie and take advantage of living in one of the best cities in America.

SALARY

GRADUATE STAFF LEVEL SALARY EFFECTIVE JULY 2023

PGY-1 \$81,000 PGY-2 \$89,700 PGY-3 \$97,000 PGY-4 \$99,800

BENEFITS

Our benefits are generous and include medical, dental, life, and disability insurance.

Additional benefits offered to residents include:

- Dependent care spending accounts
- Legal and financial planning services
- Child care via Bright Horizons subsidized cost based on annual household income
- 4 weeks of vacation leave taken 1 week at a time
- Professional liability insurance (at no cost to the trainee)
- Near-campus housing options many trainees consider hospital housing to be both convenient and reasonably priced.
 - More information on housing options can be found at https://www.nyp.org/realestate
- A \$100 meal card on a monthly basis
- Transportation stipend via Lyft
- Education stipend to cover expenses associated with attending one national conference during residency training. This stipend can also be used for an education activity (elective) of your choice.

WHY WE CHOSE WEILL CORNELL

"I wanted a strong academic program where I would graduate as a confident surgeon, with a good foundation for any fellowship I decide to do. Additionally, I was drawn to the sense of family between residents, the breadth and diversity of our patients and their pathology." - Talia Suner, Class of 2024





"The diversity of training settings, patient populations, and surgical volume produces excellent OB/GYNs. The dedication to family planning, from passionate supportive urogynecology attendings to departmental moves to make abortion care more accessible, was incredibly heartening to me and felt like a place I could grow and contribute. Additionally, after interviewing with Cornell, it was clear there was camaraderie within and between the classes." - Kaitlin Corbin. Class of 2026

"Strong training paired with lovely people. You will leave Cornell a confident and competent OBGYN, well-prepared for fellowship or generalist life. The cherry on top though, is truly the resident culture. I'm new to the city (no established friends or nearby family) and my co-residents have quickly become some of my favorite people. There are lots of opportunities to grow and resources to utilize. " - Jennifer Van Dyk, Class of 2025



"I wanted to train at a program where I would feel equally confident to practice as a generalist or to pursue fellowship. I loved the opportunity to train in a variety of settings - from the academic vibe of Cornell to more autonomy at our Queens community hospital. Cornell residents are responsible for all resident clinic patients while inpatient and Cornell provides high GYN volume and great surgical exposure."

- Katie Radford, Class of 2026

APPLICATION

If you are interested in applying to residency at Weill Cornell, please submit an application through ERAS before September 27, 2023. Your application must include the following:

- AAMC-NRMP application for residency
- An official copy of your USMLE scores
- An official medical school transcript
- 3 or more faculty recommendation letters
- Letter from your school's dean

INTERVIEWS

If you are invited to interview, you will receive a communication to schedule your interview via Thalamus in late October. Interviews will be conducted virtually on the following dates:

- Wednesday, November 1, 2023
- Tuesday, November 14, 2023
- Monday, November 20, 2023

Interviews are held in half-day blocks from 8a-12p or 1p-5p and include:

- · An opportunity to meet the chair and program directors
- A program introduction and virtual tour
- 3 faculty interviews
- 1 resident interview
- · Interview with one of the program directors

The evening before your interview date we also welcome you to join us for an optional casual meet and greet via Zoom with our current residents. More information will be sent once your interview date has been confirmed.

QUESTIONS?

If you have any questions, please reach out to obgynmededucation@med.cornell.edu







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