July 2019



Dear Applicant:

Thank you for expressing interest in the Pediatric Emergency Medicine Fellowship Program at The Children's Hospital at Montefiore and The Albert Einstein College of Medicine. Our fellowship is fully accredited by the Residency Review Committee for Pediatrics. As in the recent past, our fellowship will be using ERAS for the application. Please see our brochure for the required documents and other information

This has been a very exciting time for our service. We continue to experience growth in our service and are currently one of the busiest Pediatric Emergency Departments in our region with an annual census of about 55,000. We have a diverse group of over 17 faculty and 7 PNPs in our Division and continue to recruit new staff.

Our fellowship curriculum is continually being updated to conform to the ACGME's NAS (Next Accredidation System). Currently, our fellowship program is fully accredited without any citations. Additionally, we have added a variety of new components including a structured ultrasound curriculum. Our medical center has also recently transitioned to the EPIC charting system.

In addition, The Department of Pediatrics has successfully recruited renowned specialists with expertise in both medical and surgical care of children. Thus, the Children's Hospital can offer our patients access to the highest quality care and services available anywhere. All subspecialities are well developed in both breadth and depth, and each area includes several faculty members with a variety of clinical and research interests.

Please review the enclosed material or check out the hospital's website, https://www.cham.org/

If there are any questions, please feel free to contact our administrative supervisor, Irma Gonzalez (718-920-5312, email <u>Irgonzal@montefiore.org</u>) or myself (718-920-5312, or email to <u>dfein@montefiore.org</u>).

Sincerely,

Daniel Fein, M.D. Associate Professor of Pediatrics Fellowship Director, Pediatric Emergency Medicine Albert Einstein College of Medicine

Department of Pediatrics Division of Pediatric Emergency Medicine

Children's Hospital at Montefiore Pediatric Emergency Medicine 3415 Bainbridge Avenue Bronx, New York 10467-2490 718-920-5312 Office 718-798-6485 Fax

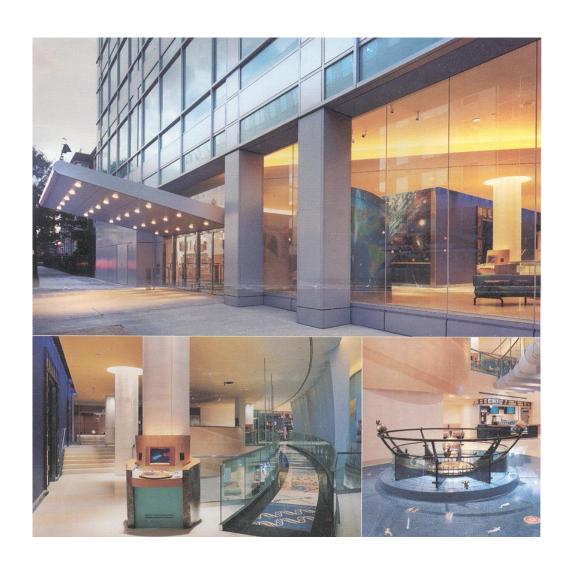
Hnin Khine, MDDivision Chief (Interim)

Amy Abraham, MD Paul Chambers, MD Daniel Fein, MD Michal Gombos, MD Jennifer Grossman, MD Tiffany Hamil, PNP Hye-Won Hong, PNP Marianne Hughes, PNP Diana King, MD Richard Levine, PNP Lourdes Maisonet, MD Gonzalo Manzano, MD Jennifer Morrison, PNP Marlene Rivera, MD Ruby Rivera, MD Zaira Rivera-Diaz, MD Kathleen Ronca, PNP Alan Schultz, PNP Catherine Sellinger, MD Victoria Shulman, MD Young-Jin Sue, MD Joy Tun, MD Sherri-Anne Wynter, MD Sarah Barrett Wren, PNP

Irma Gonzalez

Administrator

ALBERT EINSTEIN COLLEGE OF MEDICINE CHILDREN'S HOSPITAL AT MONTEFIORE



PEDIATRIC EMERGENCY MEDICINE FELLOWSHIP PROGRAM

PEDIATRIC EMERGENCY MEDICINE FELLOWSHIP PROGRAM

Children's Hospital at Montefiore Albert Einstein College of Medicine



INTRODUCTION

The fellowship in Pediatric Emergency Medicine is offered by the Department of Pediatrics of the Albert Einstein College of Medicine and its major teaching affiliated hospital, The **Children's Hospital at Montefiore** (CHAM). Montefiore Medical Center is a tertiary care center and the home of the Children's Hospital. Montefiore is also a site of Einstein's Emergency Medicine Residency program, a primary training center for Emergency Medicine in New York City. The hospitals are located in the northeast Bronx, near the Albert Einstein College of Medicine, and within easy commuting of Connecticut, Westchester County, Queens, Manhattan, and Northern New Jersey.

NEW YORK LIVING

The Children's Hospital at Montefiore is located in the north Bronx, easily accessible to Manhattan by car or by public transportation. There are excellent leisure time activities

just a short distance away: the world famous Bronx Zoo, the New York Botanical Gardens and, of course, Yankee Stadium. For golfers, the Van Cortland Park course is only a block away from Montefiore, while tennis, horseback riding and sailing off City Island are only a few minutes away. For the culturally inclined, the nearby Lehman College Center for the Performing Arts offers opera, concerts, theater and dance.



the Department's residents and fellows. The gym features an Olympic-sized indoor swimming pool, as well as a running track, a weight room, and regulation basketball and racquetball courts.

Beyond the program's immediate vicinity, but within an hour or two, are many miles of beach along the shores of Long Island and New Jersey. Skiing and other winter sports are convenient to the Bronx, just upstate in the Catskills and Adirondacks, or west of the city in New Jersey and Pennsylvania. New England's ski slopes are a bit further away, but certainly in easy reach for weekends.

Only 30 minutes away by subway, bus or car is Manhattan, with its theaters, museums, concerts, sports activities, historical landmarks, restaurants, shopping, night spots, and an endless variety of other attractions.

THE CHILDREN'S HOSPITAL AT MONTEFIORE

The Children's Hospital at Montefiore (CHAM) is a 132-bed hospital which houses the majority of the pediatric inpatient and outpatient facilities and programs. In addition, this hospital is designed to be the hub of a substantial, highly integrated network of primary and specialty services for children throughout the Bronx and lower Westchester. CHAM,



opened in October 2001, is a 10-story facility attached to the existing MMC complex.

The Children's Hospital, located at Montefiore's Moses campus is a large medical-surgical facility providing comprehensive childcare services. It functions as the primary residency-training site of the AECOM/MMC

program in pediatrics. The Moses Division, a 745-bed full service teaching hospital located in the northwest section of the Bronx, is the largest component of Montefiore's many facilities. Children receive care on four distinct units, including an Infants' Unit, housing patients from birth to two years of age; a Children's Unit, for patients three to 12 years of age; the Susan G. Benson Adolescent Unit, among the first inpatient facilities in the country devoted exclusively to the treatment of young people from 13 to 21 years old; and a Pediatric Critical Care Unit, providing state of the art care to any critically ill child.

Plans have already begun for the expansion of the Children's Hospital that will more than double the existing physical plant and expand all pediatric services including the Pediatric Emergency Department, Pediatric Radiology, Pediatric Critical Care as well as all the Inpatient Units (including the Neonatal Intensive Care Unit).

Integral to the care of children hospitalized on any of the Center's inpatient units is a wide range of psychosocial and educational support services, including a school and an extensive Child Life Program. In addition, there are Child Protection Services and a Lead Screening Program. The Children's Hospital also provides a full array of pediatric subspecialty programs, both medical and surgical, offering care to children on the inpatient units as well as in a variety of ambulatory settings. Pediatric laboratory services, with sophisticated microchemical technology, and a full complement of pediatric imaging facilities also contribute to the broad diagnostic and therapeutic capabilities available for the care of our patients and the education of our house officers.

THE PEDIATRIC EMERGENCY DEPARTMENT



Opened in September 2000, the Pediatric Emergency Department is a large, state-of-theart emergency facility dedicated to children. From entrance to exit, the PED is uniquely designed to address the needs of ill and injured children. Over 10,000 square feet of clinical area is housed in a bright area, decorated with a "space" theme that sets a calm mood a child of any age can relate to. There are many separate treatment areas, which assure a family's privacy, and are all equipped with the latest in diagnostic and therapeutic monitoring equipment so families do not have to be moved from room to room during the course of their child's treatment. The overhead lights can be dimmed for child comfort and there are backlit ceiling panels of galaxies for children to imagine drifting off into space and away from their pain and fear. And there are many other features to make a difficult experience as comfortable as possible. Expansion of the Emergency Department is already being planned as part of a major expansion of the Children's Hospital.

THE CHILDREN'S EMERGENCY SERVICE

The Children's Emergency Service at the Children's Hospital at Montefiore is responsible for about 55,000 visits per year of patients under the age of 21 years. As the primary tertiary care center in the Bronx, the Children's Emergency Service cares for children with high acuity illness and is responsible for most of the admissions to the inpatient

units. Patient care is provided by members of the pediatric and emergency medicine house staff under the supervision of primarily full-time Pediatric Emergency Medicine faculty. The PEM faculty is one of the largest groups of fellowship-trained and PEM sub-board certified physicians on the East Coast. At least two of the Attending PEM staff is present in the Emergency Department 24-hours a day, 7-days a



week; although it is more common to have 3-4 PEM faculty present in the PED. The mix of PEM Attendings, PEM Fellows and Pediatric Attendings together with pediatric nurse practitioners, child life specialists, pediatric residents, emergency medicine residents, family medicine residents, orthopedic residents and third and fourth year medical students gives the Pediatric Emergency Department a rich academic atmosphere.



FELLOWSHIP GOALS

The goals of the fellowship are to:

- 1) become clinically proficient in the medical, surgical, and behavioral aspects of emergency pediatrics through participation in hospital based outpatient and inpatient units, pre-hospital care delivery, and specialized programs related to emergency pediatrics.
- 2) develop research skills in the formulation of hypotheses, study design, project execution and implementation, and data analysis through participation in a research design and methods course as well as weekly research seminars in order to become a productive investigator.
- 3) develop skills as a teacher of emergency pediatrics to medical students, pediatric house officers, emergency medicine residents, and other health care providers through on-site precepting as well as participation in conferences.
- 4) develop skills necessary for the administration of an emergency department through participation in weekly administrative conferences and involvement in program development.
- 5) gain sufficient knowledge of related medical areas to evaluate patient needs and to interact with professionals in other specialties

CLINICAL EXPERIENCE

The clinical experience for the fellow is based on exposure to a wide variety of patient complaints. At CHAM, the fellow will not only take care of the basic diagnoses seen in pediatric emergency medicine, but there is ample opportunity for emergent care of subspecialty patients from all disciplines. The average admission rate over



10% attests to the high acuity of patients seen. The PEM staff assumes responsibility for all children seen in the Pediatric ED, regardless of the nature of the chief complaint. Therefore, the fellow will have the opportunity to manage an extensive array of medical and surgical problems. This experience will provide a breadth of learning and a depth of knowledge necessary to grow into the role of a Pediatric Emergency Medicine Attending Physician.

REQUIREMENTS FOR FELLOWSHIP

Pediatric ED- 5

The fellowship program accepts candidates who have their primary training in pediatrics or emergency medicine. If the primary training is in pediatrics, the Sub-board for Pediatric Emergency Medicine Certification requires three years of fellowship training. The academic year is based on 13 cycles, each containing 4 weeks. Sample first year, second year and third year rotations are as follows:

FIRST YEAR	SCOND YEAR	THIRD YEAR
FIRST TEAK	SCOND TEAK	THIND TEAK
Adult ED - 1	Adult ED- 1	Adult ED - 1
Anesthesia - 1	Peds Radiology- 1/2	Ultrasound - 1
Toxicology - 1	Obstetrics- 1/2	Electives - 1
Pediatric ICU- 1	EMS- $\frac{1}{2}$	Vacation - 1
Trauma- 1	Child Protection- 1/2	Research - 6
Child Abuse- ½	Vacation - 1	Pediatric ED - 3
Vacation- 1	Research - 3½	
Research- 1½	Pediatric ED - 5	

Ultrasound − ½

RESEARCH PROGRAM

Our PEM Fellowship Program considers the research experience to be an essential part of

the fellow curriculum. Each fellow conducts a research project developed by the fellow under faculty supervision as well as a Scholarship Oversight Committee. Numerous resources of the Department of Pediatrics as well as the nearby medical school are available to the fellow. In addition, there are a variety of formal conferences on research methodology. The fellow also participates in a



nine-month Fellows' Research Seminar series given by the Department of Pediatrics. Ongoing seminars on journal writing are given monthly.

TEACHING PROGRAM

The fellow will have increasing responsibility for medical student and resident supervision in the emergency department. In the First Year, fellows will be responsible for identifying teaching cases while on their rotations as well as giving occasional

morning conferences. During the Second and Third Years, fellows will assume increasing responsibility for morning conferences and will participate in PALS courses offered by the Pediatric Emergency Service.

There are many opportunities to participate in regularly scheduled conferences including lectures, case conferences, general reviews and research seminars. A special weekly Fellows' Conference is designed to address issues and topics that relate



directly to the education of the PEM fellow. These conferences include not just lectures at the fellow's level, but also include topics related to administration of the ED, looking for a job, legal issues, ethical issues, and other academic pursuits.

CERTIFICATION

By the completion of the fellowship, all fellows should be certified in Pediatric Advanced Life Support and Advanced Trauma Life Support. Our fellowship is kept up-to-date regarding the qualifications needed for future accreditation by the Residency Review Committee. The fellows will also have fulfilled the requirements needed to sit for the Pediatric Emergency Medicine Subspecialty Board Examination.

PREREQUISITES

At least three years of clinical training in a Pediatric Residency Program or four years of clinical training in an Emergency Medicine Residency Program approved by the Accreditation Council for Graduate Medical Education is required.

APPLICATION PROCESS

Our fellowship program uses the uniform application and associated services provided by ERAS[®] (Electronic Residency Application Service). An online application is required of all applicants and letters of reference will similarly be processed by ERAS. Applicants can access information on ERAS at www.aamc.org/eras. A more comprehensive description is detailed in the April issue of *Pediatric Emergency Care*.

The following documents are required for applications to be complete:

- Common Application Form
- Personal Goals Statement
- Three (3) Letters of Reference
- NBME/NBOME Transcript
- ECFMG Status Report
- Photograph
- Dean's Letter/MSPE

Please submit the application and other documents as soon as possible. The deadline for the common application form is August 15th. Any questions related to the application or pending documents should be addressed to Irma Gonzalez at 718-920-5312 or email Irgonzal@montefiore.org.

THE MATCH

This fellowship program participates in the Pediatric Emergency Medicine Fellowship Matching Program. Accepted candidates will be notified in December, as agreed to by all fellowship programs in Pediatric Emergency Medicine.

For Information Contact:

Daniel Fein M.D.

Program Director, Pediatric Emergency Medicine

Children's Hospital at Montefiore

111 East 210th Street

Bronx, NY 10467

Phone: 718-920-5312

Fax: 718-798-6485

Email: <u>dfein@montefiore.org</u>



Irma Gonzalez

Administrative Supervisor

Pediatric Emergency Medicine

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Email: <u>Irgonzal@montefiore.org</u>

Web site: www.montekids.org



"A hundred years from now it will not matter what my bank account was, the sort of house I lived in, or the kind of car I drove...but the world may be different because I was important in the life of a child."

Pediatric Emergency Service (2018) Children's Hospital at Montefiore / Albert Einstein College of Medicine

Amy Abraham, M.D.

Attending Physician
Assistant Professor of Pediatrics
Fellowship training: Methodist
Interests: pain management

Myrian Alea, M.D.

Attending Physician
Assistant Professor of Pediatrics
Interests: Administration

Paul Chambers, M.D.

Attending Physician
Quality Assurance Coordinator
Risk Management Coordinator
Assistant Professor of Pediatrics
Interests: asthma, quality assurance

Daniel Fein, M.D.

Attending Physician
Associate Director, Medical Operations
Fellowship Director

Associate Professor of Pediatrics

Fellowship Training: Children's Hospital at Montefiore/Albert Einstein College of Medicine Interests: sedation, pain management, education

Michael Gombos, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship training: Schneider's Children's Hospital/Long Island Jewish Medical Center/

Interests: otitis media, occult bacteremia, RSI

Jennifer Grossman M.D.

Attending Physician

Assistant Professor of Pediatrics Fellowship Training: Maimonides

Interests: Resident education, appendicitis, procedural training

Waseem Hafeez, M.D.* (per diem)

Attending Physician

Associate Professor Emeritus of Pediatrics

Interests: Simulation, RSI

Tiffany Hamil, P.N.P.

Pediatric Nurse Practitioner

Hye Won Hong, P.N.P.

Pediatric Nurse Practitioner

Marianne Hughes, P.N.P.

Pediatric Nurse Practitioner Follow-up Program

Hnin Khine, M.D.

Attending Physician

Interim Division Chief, Pediatric Emergency Medicine

Associate Professor of Clinical Pediatrics

Fellowship Training: Children's Hospital of Pittsburgh

Interests: trauma, evidence-based medicine, pain management

Diana King, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship training: Montefiore Medical Center – critical care

Interests: education, ethics, critical care issues

Richard Levine, A.N.P., P.N.P.

Pediatric Nurse Practitioner

Follow-up Program

Lourdes Maisonet, M.D.

Attending Physician

Assistant Professor of Pediatrics

Interests: Health disparities in emergency care

Charles Mackin M.D.

Attending Physician

Instructor, Dept. of Pediatrics

Gonzalo Manzano, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship Training: Jacobi Medical Center

Interests: Prehopsital Medicine, Ultrasound, Trauma

Jennifer Morrison, P.N.P.

Pediatric Nurse Practitioner

Monisha Parikh M.D.

Attending Physician

Instructor, Dept. of Pediatrics

Ruby Rivera, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship Training: Montefiore Medical Center/ Albert Einstein College of Medicine

Interests: asthma, psychiatric issues, toxicology, education

Marlene Rivera, M.D.

Attending Physician

Assistant Professor of Pediatrics

Zaira Rivera-Diaz, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship Training: Maimonides Medical Center

Interests: education, ultrasound, endocrine emergencies, multicultural approach to patient

care

Kathleen Ronca, A.N.P., P.N.P.

Pediatric Nurse Practitioner

Follow-up Program

Cathi Sellinger, M.D.

Attending Physician

Associate Director, Administration

Assistant Professor of Pediatrics

Interests: education, diabetes, dermatology

Alan Schultz

Pediatric Nurse Practitioner

Victoria Shulman, M.D.

Attending Physician

Assistant Clinical Professor of Pediatrics

Interests: resident education, infectious diseases

Young Jin Sue, M.D.

Attending Physician

Associate Professor of Pediatrics

Fellowship Training: Children's Hospital, Boston

Interests: toxicology, RSI, sedation

Joy Tun, M.D.

Attending Physician

Assistant Professor of Pediatrics

Fellowship Training: Bronx Municipal Hospital Center/

Interests: trauma, toxicology

Sheri-Anne Wynter M.D.

Attending Physician
Assistant Professor of Pediatrics
Fellowship Training; NYU
Interest: Simulation, Sepsis, Asthma

Sarah Barrett Wren, P.N.P.

Pediatric Nurse Practitioner Follow-up Program

Pediatric Emergency Medicine Fellows (2018):

3rd Year:

Munaza Rizvi

Residency: SUNY Downstate

2nd Year:

Natasha Nayak

Residency: Jacobi Medical Center

1st year:

Mishuka Adhikary

Residency: St. Barnabas

Rachel Levene

Residency: SUNY Downstate

PEDIATRIC EMERGENCY MEDICINE FELLOWSHIP

Children's Hospital at Montefiore Albert Einstein College of Medicine

Conference Schedule

Resident Conference - Monday to Thursday 12:15 pm, typically

CHAM 2

Monday to Friday 7am, typically CHAM 2

Grand Rounds - every Wednesday 8:00 – 9:00 am

Cherkasky Auditorium

PED Fellows Conference - every Wednesday 12-3pm**

PEM Conference Room

Ultrasound Conference - Wednesdays, variable

Morbidity/Mortality Conference - Varies

Research Conference - see attached schedule for sample schedule

Professor's Rounds - every Friday 8:30-9:30 am – CHAM 2

Attendance at PEM Fellows' Conference, ultrasound conference and Departmental Research Course are mandatory and attendance will be taken.

^{**} occasionally 9-12

PEDIATRIC EMERGENCY SERVICE

Children's Hospital at Montefiore

Albert Einstein College of Medicine

Sample Fellow Conference Topics

 All fellows conferences begin with a 30 minute case conference presented by a fellow

Journal writing seminars

How to publish a paper

How a paper is peer reviewed

Computer basics

Epi Info primer

Designing a study

Confidence intervals

Didactic lectures on PEM topics

How to study for the subspecialty exam

Journal Clubs

Controversial areas in PEM

Looking for a job

Toxicology Cases

ECG interpretation

How to write a CV

Interviewing Skills

Rapid Sequence Intubations

Preparing slides

Preparing a lecture

Writing an abstract

Radiology Cases

How the ED bills

Child Health Issues

State of Health of NY's Children

Economic Efficiency in the delivery of health care services

Micro-teaching techniques

Mini-workshops

Evaluating the residents

Microteaching

Case Conferences

PEM Board Prep and Question Review





Children's Hospital at Montefiore Albert Einstein College of Medicine

Division of Pediatric Emergency Medicine

RESEARCH ACTIVITIES 2009-2019

Journal Articles

- Tay ET, Needleman JP, Avner JR. Nebulizer and spacer device maintenance in children with asthma. J Asthma. 2009; 46: 153-5.
- 2. **Avner JR**, Baker MD. Occult bacteremia in the post-pneumococcal conjugate vaccine era: does the blood culture stop here? Acad Emerg Med. 2009; 16: 258-60.
- 3. Avner JR. Acute fever. Pediatr Rev. 2009; 30: 5-13.
- 4. **Khine H**, Weiss D, Graber N, Hoffman R, Esteban-Cruciani N, Avner JR. A cluster of children with seizures due to camphor poisoning. Pediatrics 2009; 123(5): 1269-1272.
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- 6. **Fein D, Avner JR, Khine H**. Pattern of pain management during lumbar puncture in children. Pediatr Emerg Care 2010;26:357-60.
- Olympia RP, Brady J, Kapoor S, Mahmood Q, Way E, Avner JR. Compliance of child care centers in Pennsylvania with national health and safety performance standards for emergency and disaster preparedness. Pediatr Emerg Care 2010;26:239-47.
- 8. **Olympia R, Rivera** R, Heverly S, Anyanwu U, Gregorits M. Natural Disasters and Mass-Casualty Events Affecting Children and Families: A Description of Emergency Preparedness and the Role of the Primary Care Physician. Clin Pediatri 2010 49:686-
- Rizkalla C, Bauman LJ, Avner JR. Structural Impediments to Condom Access in a High HIV/STI-Risk Area. J Environ Public Health 2010;2010.
- Ng L. Adolescent with Abdominal Pain and Altered Mental Status: Are You Confused? Clin Pediatr Emerg Med 2010;11;293-300
- 11. **Brady K, Avner JR, Khine H**. Perception and attitude of providers toward pain and anxiety associated with pediatric vaccine injection. Clin Pediatr (Phila) 2011;50:140-3.
- 12. Munjal I, Gialanella P, Goss C, McKitrick J, Avner JR, Pan Q, Litman N, Levi M. Evaluation of the 3M rapid detection test for respiratory syncytial virus (RSV) in children during the early stages of the 2009 RSV season. J Clin Microbiol 2011;49:1151-3.

- Fein DM, Janow G, Avner JR, Fagan MJ. The heart of the matter: an atypical presentation of Takayasu arteritis in the Pediatric Emergency Department. Pediatr Emerg Care. 2011 Sep;27(9):857-9.
- 14. Alderman EM, Avner JR, Racine AD. Adolescents use of the Emergency Department: Does source of primary care make a difference? Journal of Primary Care & Community Health. 2012; 3: 36-41
- 15. Tsung JW, Kessler DO, **Shah VP**. Prospective application of clinician-performed lung ultrasonography during the 2009 H1N1 influenza A pandemic: distinguishing viral from bacterial pneumonia. Crit Ultrasound J. 2012 Jul 10;4(1): 16
- Keller MJ, Madan RP, Shust G, Carpenter CA, Torres NM, Cho S, Khine H, et al. Changes in the soluble mucosal immune environment during genital herpes outbreaks. J Acquir Immune Defic Syndr. 2012;61(2):194-202.
- 17. Ng L, Khine H, Taragin BH, Avner JR, Ushay M, Nunez D. Does bedside sonographic measurement of the inferior vena cava diameter correlate with central venous pressure in the assessment of intravascular volume in children? Pediatr Emerg Care. 2013;29(3):337-41.
- 18. **Rabiner JE**, Friedman LM, **Khine H**, **Avner JR**, Tsung JW. Accuracy of Point-of-Care Ultrasound for Diagnosis of Skull Fractures in Children. Pediatrics. 2013;131(6):e1757-64.
- 19. **Rabiner JE, Khine H, Avner JR**, Friedman LM, Tsung JW. Accuracy of point-of-care ultrasonography for diagnosis of elbow fractures in children. Ann Emerg Med. 2013;61(1):9-17.
- 20. Murphy M, Smith L, Palma A, Lounsbury D, Bijur P, Chambers P, et al. Feasibility of a computer-delivered driver safety behavior screening and intervention program initiated during an emergency department visit. Traffic Inj Prev. 2013;14(1):39-45.
- 21. **Shah VP**, Tunik MG, Tsung JW. Prospective evaluation of point-of-care ultrasonography for the diagnosis of pneumonia in children and young adults. JAMA Pediatr. 2013;167(2):119-25.
- Kessler DO, Arteaga G, Ching K, Haubner L, Kamdar G, Krantz A, Lindower J, Miller M, Petrescu M, Pusic MV, Rocker J, Shah N, Strother C, Tilt L, Weinberg ER, Chang TP, Fein DM, Auerbach M. Interns' Success with Clinical Procedures in Infants After Simulation Training. Pediatrics, 2013 Mar;131(3):e811.
- 23. **Fein DM**, Hafeez **Z**, **Cavagnaro C**. An overdose of extended-release guanfacine. Pediatr Emerg Care. 2013 Aug;29(8):929-31
- 24. **Rabiner JE**, Auerbach M, **Avner JR**, Daswani D, **Khine H**. Comparison of GlideScope Videolaryngoscopy to Direct Laryngoscopy for Intubation of a Pediatric Simulator by Novice Physicians. Emerg Med Int. 2013;2013:407547
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- 31. **Daswani DD**, **Shah VP**, **Avner JR**, Manwani DG, Kurian J, **Rabiner JE**. Accuracy of Point-of-care Lung Ultrasonography for Diagnosis of Acute Chest Syndrome in Pediatric Patients with Sickle Cell Disease and Fever. Acad Emerg Med. 2016 Aug;23(8):932-40
- 32. Hananiya A, **Fagan M**, Douglas L: Rickettsial Pox in a Pediatric Patient. Pediatr Emerg Care. 2017 Apr;33(4):260-262
- 33. Kessler DO, Chang TP, Auerbach M, **Fein DM**, Lavoie ME, Trainor J, Lee MO, Gerard JM, Grossman D, Whitfill T, Pusic M. Screening Residents for Infant Lumbar Puncture Readiness with Just-in-time Simulation-based Assessments. BMJ Simulation and Technology Enhanced Learning. 2017;3:17-22
- 34. **Fein DM**, Scharbach K, Manwani D, **Avner JR**, **Khine H**. Intranasal Fentanyl for Initial Treatment of a Vaso-occlusive Crisis in Sickle Cell Disease Pediatr Blood Cancer. 2017 Jun;64(6)
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- 44. Cunqueiro A, Durango A, **Fein DM**, Ye K, Scheinfeld MH. Diagnostic yield of head CT in pediatric emergency department patients with acute psychosis or hallucinations. Pediatr Radiol. 2019 Feb;49(2):240-244.
- 45. Patel B, **Khine H**, Shah A, Sung D, Medar S, Singer L. Randomized clinical trial of high concentration versus titrated oxygen use in pediatric asthma. Pediatr Pulmonol. 2019 Apr 3. doi: 10.1002/ppul.24329. [Epub ahead of print]

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- Tay ET, Hafeez W: Intraosseous Access online E-Medicine Journal/Clinical Procedures/Vascular Techniques (CME Article). 4/04/2007 updated 2009 Access at: http://www.emedicine.com/proc/topic80431.htm.
- 3. **Hafeez W**: Resuscitation in Crain EF, Gershel JC (eds.) Clinical Manual of Emergency Pediatrics (5th ed.) Cambridge University Press, 2009: 1 29
- 4. **Hafeez W**: Code Card in Crain EF, Gershel JC (eds.) Clinical Manual of Emergency Pediatrics (5th ed.) Cambridge University Press, 2009: Index 771
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- 8. **Avner JR, Sue YJ**: Trauma, Ingestions and Burns. In Pediatrics for Medical Students (3rd edition); Bernstein D, Shelov SP (eds), Lippincott Williams & Wilkins, Philadelphia, PA. 2011.

- 9. **Avner JR**: Gastrointestinal hemorrhage. In Textbook of Pediatric Care, McInerny TK, et al. (ed), American Academy of Pediatrics, Elk Grove Village, IL. (In Press).
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- 18. **Rivera R, Sellinger C.** Dizziness and Vertigo. In Textbook of Pediatric Care, McInerny TK, et al. (ed), American Academy of Pediatrics, Elk Grove Village, IL. (In Press).
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- 43. **Rakovchik EE, Fein DM**. Nonsteroidal Anti-Inflammatory Drug and Salicylate Poisoning, Pediatr Rev: 2016 Jan; 37(1):48-50
- 44. Nadler A, Fein DM. Acetaminophen Poisoning, Pediatr Rev: 2018 Jun;39(6):316-18
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- Munjal I, Gialanella P, Goss C, McKitrick JC, Avner JR, Litman N, Levi MH. Evaluation of the 3M Rapid Detection Test for Respiratory Syncytial Virus (RSV) during the Early Stages of the 2009 RSV Season. Presented at the American Society for Microbiology Annual Meeting, San Diego, CA, May 2010.
- 3. **Brady K, Khine H, Avner JR**. Perception and Attitude of Caregivers Toward Pain and Anxiety Associated with Pediatric Vaccine Injection. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2010.

- 4. **Shah V.** Correlation of lung ultrasound findings in infants with bronchiolitis and the Respiratory Distress Assessment Instrument (RDAI) score. Presented at the 6th WINFOCUS World Congress on ultrasound in Emergency and Critical Care. Rome, Italy, October 2010
- Shah V. Prospective Evaluation of Point-of-care Ultrasound for the Detection of Pleural Effusion and Assisted Thoracentesis in Children Presenting to the Emergency. Presented at the 6th WINFOCUS World Congress on ultrasound in Emergency and Critical Care. Rome, Italy, October 2010
- 6. Shah V. Prospective Application of the Bedside Lung Ultrasound in Emergency (BLUE) Protocol for Rapid Emergency Department Triage and Management During The 2009 H1NI Epidemic. Presented at the 6th WINFOCUS World Congress on ultrasound in Emergency and Critical Care. Rome, Italy, October 2010
- 7. Fein D, Avner JR, Auerbach M, et. al. Patterns of Analgesia Use by Pediatric Interns for Lumbar Puncture in Children Less Than One Year of Age. Presented at the 11th Annual International Meeting on Simulation in Healthcare (IMSH), New Orleans, Louisiana, January 2011
- 8. **Fein D, Avner JR**, Auerbach M, et. al. Analgesia Use for Infant Lumbar Puncture by Interns after an Educational Intervention. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2011
- Ng L, Taragin B, Avner JR, Ushay M, Nunez D. Does the IVC diameter correlate with central venous pressure (CVP) in the assessment of intravascular volume in children?
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- Fein DM, Racine AD. Efficacy of primary care clinics offering increased influenza vaccine delivery.
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- 11. **Shah VP**, Tsung JW. Point-of-Care lung ultrasound (Lung US) findings in children with bronchiolitis and correlation with the respiratory distress assessment instrument (RDAI) Score. Presented at the Pediatric Academic Societies Meeting, Denver, CO, May 2011
- Canares T, Chambers P, Scharbach K. The Etiology of Respiratory Infection and Severity of Illness. Presented at the Pediatric Academic Societies Meeting, Denver, CO, May 2011
- Auerbach M, Chang TP, Fein D, Gerard JM, Scherzer DJ, Reid J, Rabe G, Pusic MV and Kessler DO. Simulator Based Just-In-Time Competency Assessment to Predict Clinical Infant Lumbar Puncture Success. Presented at the 2011 AAP national conference.
- 14. Kessler D, Fein D, Agrawal D, Reid J, Rocker J, Pusic M, Haubner L, Auerbach M. Impact of a Simulation Based Just in Time Refresher Training for Interns on Their Clinical Success Rate with Infant Lumbar Puncture Abstract presented as a platform presentation at the 2011 International Pediatric Simulation Symposia and Workshop Conference, Toulouse, France
- 15. Auerbach M, Chang T, Fein D, Gerard J, Mehta R, Scherzer DJ, Reid J, Rabe G, Pusic M, Kessler D. Simulation Based Competency Assessment to Predict Clinical Infant Lumbar Puncture Success. Abstract presented as a platform presentation at the 2011 International Pediatric Simulation Symposia and Workshop Conference, Toulouse, France

- Khine H, Goldman D, Ochoa K, Avner JR. Comparison of the management of Fever in Children aged 3-36 months by PEM and GEM physicians. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012
- 17. Rabiner J, Khine H, Avner JR, Tsung JW. Accuracy of Point-of-Care Ultrasound for Diagnosis of Elbow Fractures in Children. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012 (<u>Dr. Rabiner received the APA Fellow Research Award for this presentation</u>) and presented at the Society for Emergency Medicine National Meeting, Chicago, IL, May 2012.
- Friedman L, Rabiner JE, Tsung JW. Accuracy of Point-of-Care Ultrasound (PoCUS) by Novice Pediatric Emergency Sonologists in the Diagnosis of Skull Fractures. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012
- Chang TP, Kessler D, Auerbach M, Scherzer DJ, McAninch B, Jackson J, Zaveri P, Seelbach E, Mehta R, Ching K, van Ittersum W, Dobson J, Fein D, Strother C, Rocker J, Pusic M. Script Concordance Testing and Lumbar Puncture Practice Variation among Trainees and Physicians. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012
- 20. Rabiner, JE, Auerbach, M, Avner, JR, Daswani, D, Khine, H. Comparison of GlideScope Videolaryngoscopy to Miller Direct Laryngoscopy for Intubation of a Pediatric Simulator by Novice Physicians. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012 and at the Society for Emergency Medicine National Meeting, Chicago, IL, May 2012.
- Rabiner, JE, Khine, H, Avner, JR, Tsung, JW. Ultrasound Findings of the Elbow Posterior Fat Pad in Children with Radial Head Subluxation. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012 and at the Society for Emergency Medicine National Meeting, Chicago, IL, May 2012.
- Freundlich C, Kavanagh P, Khine H. The utility of chest radiographs in the evaluation of febrile children with sickle cell disease. Presented at the Pediatric Academic Societies Meeting, Boston, MA. May 2012
- 23. Auerbach M, Chang T, Mehta R, Reid J, Lemke D, Gerard J, Fein D, Zaveri P, Kessler D. Does "Just in Time" Simulation Based Competency Assessment Predict Clinical Infant Lumbar Puncture Success. Abstract presented as a poster at the 2012 International Meeting on Simulation and Healthcare
- Delany K, Pankow A, Rabiner J. Analgesia for Appendicitis in Children in Pediatric and General Emergency Departments. Accepted for presentation at the Pediatric Academic Societies Meeting, Washington, DC, May 2013.
- Tokarski J, Rabiner J. Observation after Racemic Epinephrine for Croup in the Pediatric Emergency Department. Accepted for presentation at the Pediatric Academic Societies Meeting, Washington, DC, May 2013.
- Fein D, Avner JR, Auerbach M, et. al. Analgesia Use for Infant Lumbar Puncture by Interns after an Educational Intervention. Accepted for presentation at the Pediatric Academic Societies Meeting, Washington, DC, May 2013.
- 27. Kessler D, Chang T, Mehta R, Agrawal D, Zaveri P, Grossman D, Seelbach EB, Lavoie M, Gerard J, Fein DM, Trainor J, Lee MO, Srivastava G, Iyer S, White ML, McQueen A, Auerbach M. Does A Just- in- Time Simulation Based Competency Assessment Improve Trainee Clinical Success With Their first Infant Lumbar Puncture. Abstract presented as a poster at the 2013 International

- Pediatric Simulation Society Meeting in April 2013 and at 2013 Pediatric Academic Societies Conference.
- 28. White ML, Burns R, Zaveri PP, McAninch B, Auerbach M, Seelbach B, **Fein DM**, Jang J, Mehta R, Chang T, Kessler D. Infant Lumbar Punctures Success Rates Reported by Upper Level Residents Abstract presented as a poster at the 2014 International Meeting on Simulation and Healthcare
- 29. Wren SB, Agcanas N, Goldman DL, Khine H. Pattern of Presentations Among Female Adolescent patients with Gonorrhea and Chlamydia Infections in the Pediatric Emergency Department. Presented at the ESPR Annual Meeting, Philadelphia, PA March 2014.
- 30. Altberg G, Koons K, SilverE, Khine H, Avner JR: Validation of a Risk Stratification Strategy to Identify Serious Bacterial Illness in Febrile Patients with Sickle Cell Disease Who Present to the ED in the Post-PCV7 Era. Poster presentation to the National Meeting of the Pediatric Academic Societies, Vancouver, BC, May 2014.
- 31. **Fein D**, Hartley R, Choi S, **Chambers P**: A Quality Improvement Project to Improve Pain Management for Patients With Extremity Pain in the Pediatric ED. Platform presentation to the ESPR Annual Meeting and National Meeting of the Pediatric Academic Societies, Vancouver, BC, May 2014.
- 32. Kessler DO, Auerbach M, Fein DM, Chang TP, Lee M, Mehta R, Gerard JM, Trainor J, Pusic M. Implementation and Impact of a Just-in-Time Assessment to Determine Intern Readiness to Perform Their First Infant Lumbar Puncture. Abstract presented as platform presentations at the at 2014 AAP NCE
- 33. Daswani DD, Shah VP, Avner JR, Manwani DG, Kurian J, Rabiner JE. Accuracy of Point-of-Care Lung Ultrasound for Diagnosis of Acute Chest Syndrome in Pediatric Patients with Sickle Cell Disease and Fever. Presented at the Eastern Society for Pediatric Research meeting in Philadephila, PA March 2015 and the Pediatric Academic Societies Meeting, San Deigo, CA. April 2015 (Dr. Daswani received the APA Fellow Research Award for this presentation).
- Bailey K, Roberts S, Gensure R. A Case of Vitamin D Toxicity in a Child from an Over-The-Counter Multivitamin. Presented at the Lower New York- AACE Annual Meeting, New York, NY Oct 2015.
- 35. Cain M, Wren S, Goldman D, Khine H: The Effectiveness of Text Messaging Compared With Phone Communication in Contacting Adolescent Patients with Sexually Transmitted Infection Test Results from the Pediatric Emergency Department. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016
- 36. Tokarski J, Avner JR, Rabiner J: Can Point-of-Care Elbow Ultrasonography Reduce the Use of Radiography for Elbow Trauma in Children? Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016.
- Capua M, Shoag J, Golfeiz D, Avner JR, Rabiner J: Validation of Risk Stratification Criteria to Identify Febrile Neonates at Low Risk of Serious Bacterial Infection. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016
- 38. Nadler A, Avner D, Khine H, Avner JR, Fein D: Clinical Burden of Psychiatric Visits on the Pediatric Emergency Department. Presented at the Eastern Society for Pediatric Research Annual

- Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016
- 39. Proper C, Wren S, Goldman D, Alderman E, Khine H: Risk Factors for Sexually Transmitted Infection in Patients Seeking Emergency Psychiatric Evaluation in the Pediatric Emergency Department. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016.
- 40. Vo A, Goldman D, **Khine H**: Management of Intussusception: Reduction Type and Recurrence Rates. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016.
- 41. Cassel-Choudhury G, Katyal C, **Rivera R**, Beal J: Protocol Driven Management of Convulsive Status Epilepticus in a Single Center Children's Hospital. Presented at the Eastern Society for Pediatric Research Annual Meeting, Philadelphia, PA, March 2016 and the Pediatric Academic Societies Meeting, Baltimore, MD, May 2016.
- 42. Nadler A, Avner D, Khine H, Avner JR, Fein DM. The Clinical Burden of Psychiatric Visits on the Pediatric Emergency Department. Presented as platform presentation at 2016 Eastern Society for Pediatric Research Conference and as a poster at the 2016 Pediatric Academic Societies Conference
- 43. Prendaj E, **Fein DM**, Dadlez N, Thompson J, Tomer G. Improving Time to Antibiotics in Short Bowel Syndrome Patients with Central Line and Fever in the Emergency Department. *Presented as poster presentation at 2016 World Congress of Pediatric Gastroenterology, Hepatology and Nutrition and 2017 Digestive Disease Week Conference*
- 44. Kessler D, Auerbach M, Fein DM, Chang TP Infant Lumbar Puncture iPad App Presented at Video Game Arcade at the 2017 International Meeting on Simulation in Healthcare
- 45. Sokoloff W, Simuro N, Olson P, **Fein DM**. Filling rates and accessibility of Self-Injected Epinephrine Prescribed from a Pediatric Emergency Department. Presented as platform presentation at 2017 Eastern Society for Pediatric Research Conference and as a poster at the 2017 Pediatric Academic Societies Conference
- 46. Fawcett KJ, Fein DM, McNamara CA, Ching K, Harwayne-Gidansky I. Mixed-Methods Analysis: Reasons for Head CT in Low and Intermediate PECARN Risk Group. Presented as poster presentations at 2018 Eastern Society for Pediatric Research Conference and 2018 Pediatric Academic Societies Conference
- 47. McKee RS, Schnadower D, Tarr PI, Desai N, Lane R, Bregmann K, Kaplan R, Hariharan S, Cruz A, Cohen DM, Dixon A, Finkelstein Y, Hickey R, Rominger A, Powell EC, Poonai N, Michelson KA, Beer D, Pruitt CM, Yen K, Bitzan M, Plint AC, Meckler G, Bradin S, Abramo TJ, Gouin S, Kam A, Balamuth F, Hunley TE, Schuh A, Kanegay JT, Jones NE, Meltzer JA, Avva U, Ramgopal S, Fein DM, Louie J, Cohen A, Freedman SB on behalf of PERC and PEM CRC. Practice Patterns and Outcomes of Children Infected with Verocytotoxin-producing Escherichia Coli (VTEC) in Pediatric Emergency Departments in North America. Presented as a platform presentation at 2018 Pediatric Academic Societies Conference and oral presentation at the International VTEC Symposium in Florence.
- 48. Edusi G, Germain E, Sinnet M, Rudnick E, Khine H, Fein DM. Impact of and Emergency Medicine Pediatric Pharmacist: Tools and Measures. *Presented as a poster at the 2018 Pediatric Pharmacy Advocacy Group Meeting*

- 49. Kou M, Khanna K, Jamal N, Baghdassarian A, Carney M, Langhan M, Fein DM, Kim I, Rose J, Zuckerbraun N, Roskind CG. Guiding fellows to practice independently: current trends in pediatric emergency medicine fellow supervision. *Presented as a poster presentation at 2019 Pediatric Academic Societies and Society of Academic Emergency Medicine conferences*
- 50. Nemetski SM, Goss D, Khine H, Fein DM. Virtual Reality as Anxiolysis for Children Undergoing Laceration Repair in the Pediatric Emergency Room: A Pilot Study. Presented as a platform presentation at the 2019 Eastern Society for Pediatric Research Conference and as a poster presentation at 2019 Pediatric Academic Societies Conference
- 51. Khan M, Rosenberg M, Fein DM, Quezada X, Reingold R.... Meltzer J. Internationally-Acquired Severe Systemic Infections in Pediatric Travelers. *Presented as a poster presentation at 2019 Pediatric Academic Societies Conference*

Awards & Honors (2012-2019):

Dr. Jeffrey R. Avner received the Harry Gordon Award for outstanding clinical teaching of medical students at the Albert Einstein College of Medicine commencement ceremony, 2012.

Dr. Joni Rabiner was awarded the APA Fellow Research Award at the Pediatric Academic Societies Meeting (2012) for her research presentation entitled: Accuracy of Point-of-Care Ultrasound for Diagnosis of Elbow Fractures in Children.

Dr. Joni Rabiner was awarded the "Golden Probe Award" at the 8th Annual WINFOCUS World Conference (Barcelona, October 2012) for her research on "Accuracy of point-of-care ultrasound for diagnosis of elbow fractures in children".

Dr. Daniel Fein was awarded the "outstanding housestaff award" at the Resident and Alumni Dinner of Montefiore Medical Center, March 2013.

Dr. Hnin Khine received the William Obrinsky Award from the Department of Pediatrics for excellence in medical student teaching, June 2013.

Dr. Dina Daswani received 1st place in the Evidence Based Medicine Competition for her presentation on Point of Care Ultrasound in the Pediatric ED for the Diagnosis of Pneumonia. May 2014.

Marianne Hughes PNP, received Montefiore's Advance Practice Nurse of the Year award. May 2014.

Dr. Dina Daswani was awarded Society of Pediatric Research Richard D. Rowe Award in Clinical Research 2015 awarded at the Pediatric Academic Societies Meeting (2015) for her research presentation entitled: Accuracy of Point-of-Care Lung Ultrasound for Diagnosis of Acute Chest Syndrome in Pediatric Patients with Sickle Cell Disease and Fever

Dr. Daniel Fein was awarded the Lewis M. Fraad award for excellence in resident treaching from the Department of Pediatrics in 2017

Dr. Hnin Khine was awarded the Lewis M. Fraad award for excellence in resident treaching from the Department of Pediatrics in 2019