



BRIGHAM AND WOMEN'S HOSPITAL



Vascular Medicine *Fellowship Application*

TO THE APPLICANT

The Vascular Medicine Section of the Cardiovascular Division of Brigham and Women's Hospital maintains both clinical and research fellowship programs. The goal of the training program is to prepare trainees to be outstanding academic vascular medicine specialists involved in clinical care, research, and education. This manual is designed to introduce prospective applicants to the breadth and depth of vascular medicine training available at the Brigham and to serve as a guide for fellows in the program. The Cardiovascular Division also offers training in vascular intervention, which is described in a separate brochure.

The primary purpose of the clinical component of the fellowship is the training of physicians in three major areas of vascular medicine: inpatient and outpatient clinical care and consultation, noninvasive diagnostic techniques, and invasive vascular procedures. A minimum of 12 months is spent in these clinical activities, including required and elective rotations. A central goal of the program is to prepare physicians to be outstanding vascular clinicians and to help each individual develop one or more specific areas of exceptional clinical skill. All clinical fellows will become eligible for the American Board of Vascular Medicine's examination in Vascular Medicine. Minimum requirements for Board eligibility include 12 months of full-time clinical training. Clinical activities of the Brigham and Women's Hospital program include training experiences at Brigham and Women's Hospital and VA Boston Healthcare/West Roxbury Campus.

The primary purpose of the research component of the fellowship is to develop expertise in a specific area of clinical investigation. This work may be pursued in physiology, pharmacology, noninvasive imaging, catheterization, clinical trials/epidemiology, or any of a number of combinations thereof. In most instances, 24 months will be spent in this type of training. All fellows will be encouraged to write for extramural funding as part of their research training. It is anticipated that such training will prepare fellows for productive careers in academic vascular medicine.

The combined clinical and research fellowship for most trainees is a three year program; trainees in this program are assured of three years of financial support. In this brochure we provide more detailed information on the structure of the training program and faculty. The fellowship program provides training in "cutting-edge" technology and research that will form the basis for cardiovascular research in the coming decades.

Brigham and Women's Hospital is a recipient of a NIH Clinical and Research Training Program for Academic Vascular Medicine Specialists. For additional information regarding this NIH Award, please see: <http://www.nhlbi.nih.gov/funding/training/redbook/k12-vasmed.htm>.

We hope you enjoy this introduction to the Cardiovascular Division and we invite you to consider joining us if your career objectives coincide with program offerings.

Mark A. Creager, M.D.

FACULTY MEMBERS

Mark A. Creager, MD
Program Director, Vascular Medicine

Vascular Medicine Faculty

Mark A. Creager, MD
Joshua A. Beckman, MD
Andrew C. Eisenhauer, MD
Marie Gerhard-Herman, MD
Samuel Z. Goldhaber, MD
Scott Kinlay, MBBS
Jorge Plutzky, MD
Piotr Sobieszczyk, MD

Vascular Surgery Faculty

Michael Belkin, MD
Edwin C. Gravereaux, MD
Matthew T. Menard, MD
Louis L. Nguyen, MD
C. Keith Ozaki, MD
Anthony D. Whittemore, MD

Radiology Faculty

Frank J. Rybicki, MD, PhD
Marcelo F. Di Carli, MD
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Vascular Medicine Advisory Board

Joseph Loscalzo, MD PhD
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HISTORY AND PRESENT ORGANIZATION OF THE CARDIOVASCULAR DIVISION OF BRIGHAM AND WOMEN'S HOSPITAL

The Hospital has been a center for training in cardiovascular medicine and research virtually since its founding in 1913 under the leadership of outstanding physicians and investigators such as Drs. Henry Christian, Soma Weiss, Samuel Levine, Lewis Dexter and Richard Gorlin. Until 1971, there was no single administrative chief of the Cardiovascular Division; but rather, Drs. Dexter, Gorlin and Lown maintained separate clinical services and research facilities. Following the appointment of Dr. Eugene Braunwald as Chairman of the Department of Medicine, Dr. Thomas W. Smith was appointed Chief of the Cardiovascular Division. Under Dr. Smith's leadership, there was a dramatic growth in the number of faculty as well as in the depth and breadth of research investigation. In 1980, three Harvard teaching hospitals, the Robert B. Brigham Hospital, the Peter Bent Brigham Hospital and the Boston Hospital for Women merged to form the Brigham and Women's Hospital. In 1984, under the leadership of Dr. Eugene Braunwald, the Department of Medicine at Brigham and Women's Hospital created one of the few Divisions of Vascular Medicine in the country. Its first faculty members were Drs. Victor Dzau, Joseph Loscalzo and Mark Creager. These and subsequent members of the Vascular Medicine Division, such as Drs. John Cooke and Alan Hirsch, have gone on to develop Cardiovascular and Vascular Medicine programs at other institutions. Dr. Creager looks forward to bringing the Vascular Medicine Section into the 21st century by maintaining the Brigham and Women's commitment to academic cardiology while meeting the challenge of the current medical climate.

THE BOSTON AREA

Boston is considered by many to be one of the most desirable cities in this country. In addition to its world-renowned educational institutions, numerous cultural activities and museums are available including the Boston Symphony Orchestra, Boston Pops, Boston Ballet, Museum of Fine Arts, and Museum of Science. Many historical sites may be found locally and it is only a short drive to surrounding areas including Plymouth, Salem, Lexington, and Concord. Boston is a one hour drive by car from the beaches of Cape Cod and 2-3 hours from the ski slopes in Maine, Vermont and New Hampshire. The city is the home of the Boston Red Sox, Bruins, and Celtics, and the home of the New England Patriots in nearby Foxboro. The city provides stimulating and exciting educational and cultural activities for all.

CLINICAL TRAINING IN VASCULAR MEDICINE

The clinical training in vascular medicine consists of a core of 12 months of clinical rotations. A unique aspect of our training program is the opportunity to work one on one with an experienced, talented staff member. **During the core year fellows rotate through the:**

Inpatient Vascular Consultation: The inpatient vascular medicine consultative rotations are intended to provide the trainee with experience in diagnosing and managing a broad spectrum of vascular diseases, including the systemic manifestations of atherosclerosis, such as peripheral arterial disease, renal artery stenosis, mesenteric vascular disease, and extracranial cerebrovascular disease; aneurysmal disease of the aorta and peripheral arteries; vasculitis

(including thromboangiitis obliterans, Takayasu arteritis, giant cell arteritis, and other forms of vasculitis, such as cryoglobulinemic vasculitis, vasculitis secondary to connective tissue diseases, drug-induced vasculitis, etc.); vasospastic diseases (e.g., Raynaud's phenomenon); thoracic outlet syndromes; venous thromboembolism, chronic venous insufficiency, and varicose veins; vascular diseases related to temperature (pernio, erythromelalgia); complex regional pain syndrome; lymphedema; leg ulcers; congenital vascular anomalies, and uncommon disorders such as fibromuscular dysplasia, and arterial entrapment syndromes. In addition, trainees will participate in the preoperative evaluation, risk assessment, and perioperative management of patients undergoing vascular surgery. There will be considerable exposure to identifying and treating risk factors for atherosclerosis (including hypertension, hyperlipidemia and diabetes mellitus) and identifying and treating hypercoagulable states. Faculty members supervising the trainees' consultative rotation include the Program Director, Dr. Creager, in concert with other Vascular Medicine physicians including Drs. Marie Gerhard-Herman, Samuel Goldhaber, Joshua Beckman, Jorge Plutzky, Andrew Eisenhauer, and Piotr Sobieszczyk.

Noninvasive Vascular Laboratory: A structured three month Noninvasive Vascular Laboratory rotation will enable the trainee to acquire expertise in the full range of noninvasive tests performed to evaluate patients with vascular diseases. These will include physiologic diagnostic studies of the upper and lower extremities, such as segmental blood pressure measurements, pulse volume recordings and Doppler waveform analysis as well as exercise testing with post-exercise pressure measurements to assess hemodynamic responses and functional capacity. An important component of the noninvasive vascular diagnostic laboratory experience will be the acquisition of the skills necessary to perform and interpret vascular duplex ultrasound examinations. During this rotation, the trainee will learn the principles governing ultrasonography and acquire fundamental knowledge in ultrasound physics, transducer technology and ultrasound instruments, and importantly, learn how to utilize ultrasound instrument settings and manipulate a transducer to acquire optimal images for duplex ultrasound studies of the carotid arteries, peripheral arteries and bypass grafts, renal arteries, and peripheral veins. The trainee will gain sufficient experience to meet published standards. The trainee will perform and interpret a minimum of 100 physiological arterial examinations, 100 venous duplex ultrasound examinations, 100 arterial duplex ultrasound examinations, and 100 carotid duplex ultrasound examinations. The trainee will also acquire experience with visceral (renal and mesenteric) duplex ultrasound examinations. The Noninvasive Vascular Laboratory experience will be supervised by the laboratory director, Dr. Gerhard-Herman, and also by Drs. Creager and Beckman.

Vascular Imaging: The trainee will dedicate one to two months to Vascular Imaging in the CardioVascular (CV) Imaging Laboratory. This time will be devoted to acquiring fundamental knowledge about vascular magnetic resonance (MR) and computed tomographic (CT) imaging. With respect to MR, the trainee is expected to learn imaging principles and become familiar with MR angiographic techniques such as time of flight and gadolinium infusion imaging. Trainees will also be expected to learn principles of CT angiography, contrast dosing, and radiation safety. For both MR and CT, the trainee will become familiar with post-processing two and three-dimensional reconstruction techniques utilizing maximum intensity projections and multi-planar reformatting. For all noninvasive angiographic techniques, the trainee will learn normal and pathologic states of the aorta, peripheral arterial system, renal and mesenteric vasculature, as well as the carotid and pulmonary circulations. This training will be

acquired by participating in review and interpretation sessions under the supervision of Dr. Frank Rybicki, Co-director of the Cardiovascular Imaging Section on the Department of Radiology.

Vascular Intervention: The trainee will spend one to two months in the Catheterization and Interventional Radiology Laboratories to observe and assist in the performance of peripheral angiography and catheter-based endovascular interventions. The trainee will develop an understanding of the indications, complications and limitations of peripheral angiography and have the opportunity to read and interpret diagnostic angiograms during supervised reading sessions. In addition, the trainee will be exposed to peripheral angioplasty, endovascular stents, distal protection devices, stent grafts, filters, catheter-based thrombolysis and thrombectomy, thrombin injection of pseudoaneurysms, and superficial vein ablation. Drs. Andrew Eisenhauer and Piotr Sobieszczyk of the Cardiovascular Division will provide overall supervision for the trainee's experience in peripheral angiography and endovascular intervention. Drs. Edwin Gravereaux and Matt Menard, from the Division of Vascular Surgery and Dr. Richard Baum of the Interventional Radiology Division will participate as faculty members. This 1-2 month rotation is not intended to provide the trainee with the requisite knowledge, skills, and experience to perform angiography or catheter-based interventions independently

Vascular Surgery: Trainees will spend one to two months on the Vascular Surgery service. They will participate in the outpatient evaluation and management of the vascular patients referred to our institution's vascular surgeons, round on the vascular surgery inpatients, and observe vascular surgical procedures in the operating room. The trainee will become familiar with the indications, contraindications, risk, and potential complications of patients undergoing vascular surgery. They will develop an appreciation of the complex and extensive nature of vascular surgical procedures, and participate in the postoperative care of patients undergoing vascular surgery. The trainee will observe operations for repair of aortic aneurysms, aortic reconstruction for occlusive disease, infrainguinal bypass and carotid endarterectomy as well as other vascular surgery operations. They will learn to evaluate and manage arterial, venous and neuropathic ulcers. Vascular surgery faculty including Drs. Michael Belkin, Edwin Gravereaux, Matt Menard and Louis Nguyen will supervise the trainees during the vascular surgery rotation.

AMBULATORY VASCULAR MEDICINE EXPERIENCE

The ambulatory cardiovascular experience is a weekly commitment that extends over the three years of the fellowship training period. Fellows provide ambulatory care at two sites: 1) Watkins Cardiovascular Clinic and 2) Boston Veterans Administration Continuity Clinic.

1) The Watkins Cardiovascular Clinic

Located in the new Carl J. and Ruth Shapiro Cardiovascular Center, the Watkins Cardiovascular Clinic is home to the outpatient heart and vascular services. The clinic facilitates integrated clinical care for patients, providing easy access to vascular medicine specialists, cardiologists, cardiac surgeons, vascular surgeons and radiologists. Office hours are generally from 8:30 a.m. to 6:00 p.m. daily.

One half day per week, fellows will see their own patients and referrals from general practitioners, internists, cardiologists, or surgeons in the community or from surrounding areas for evaluation and management of diagnostic and/or therapeutic problems. Fellows will evaluate and manage a broad range of vascular diseases including those related to atherosclerosis, thrombosis, chronic venous disease and lymphatic disorders. Fellows are responsible for the entire vascular care of these patients, including the dictation of letters to referring physicians and the arrangement of diagnostic and/or therapeutic procedures as needed. Supervision will be provided by a rotating faculty member derived from the vascular medicine faculty. In this way, a variety of out-patient management styles will be used and the fellow will be clearly denoted as the primary care-giver.

2) **Veterans Administration Continuity Clinic**

Fellows participate in the vascular medicine clinic at the West Roxbury Campus of the VA Boston Healthcare System. Each fellow works with a "team" (a staff member, a nurse manager and other fellows) in seeing new ambulatory patients and following them longitudinally. Fellows encounter a variety of vascular diseases, especially those related to atherosclerosis and thrombosis. Again, the primary vascular care of the veteran becomes the responsibility of the fellow.

ROUNDS AND CONFERENCES

There are daily teaching rounds on all of the major subsections of the Cardiovascular Division at the Brigham and Women's Hospital and at the West Roxbury campus of VA Boston Healthcare. There are also weekly conferences that cover a broad range of subjects including anatomy, physiology, genetics, physical diagnosis, therapeutics, clinical trials/outcomes, epidemiology, and pharmacology. In addition, at the beginning of the fellowship program, each first year fellowship cohort participates in a week-long orientation period to familiarize the trainees with basic cardiology principles and practices of the Brigham and Women's Hospital.

The following **VASCULAR MEDICINE CONFERENCES** are held at Brigham and Women's Hospital and are open to all:

- A. On Thursdays at 7:30 AM, a weekly **Vascular Conference** will be held in the A3 Conference Room. This conference will include case presentations of cases by Vascular Fellows to Vascular Staff. One Thursday of the month will be a dedicated Vascular Medicine Journal Club, in which recent articles that impact on vascular care will be presented and discussed. All fellows are expected to attend.
- B. On the fourth Tuesday of every month, at 12:00 PM there is a **Vascular Medicine** conference held for the Cardiovascular Division in the Dexter Library. Once per month, a Vascular Fellow or an invited speaker will present a vascular topic to the cardiovascular fellows and faculty. All fellows are expected to attend. Each Vascular Fellow is expected to present at this conference at least once per year.

The following **GENERAL CARDIOVASCULAR CONFERENCES** are held at Brigham and Women's Hospital and are open to all:

- A. On Tuesdays from 7:30 a.m. to 8:30 a.m., the Cardiovascular Division **Clinical Conference** is held in the Bornstein Amphitheater. These rounds are the focal point for the clinical division where cases of particular interest from the clinical service, catheterization lab, consultation, coronary care unit, and the noninvasive lab are presented. Cardiac and vascular surgical colleagues are often in attendance and participate actively in this conference. Once a month, cardiovascular pathology formally reviews clinicopathologic correlations including histology and gross specimens along with imaging studies obtained antemortem. The monthly Morbidity and Mortality Conference is also held during this time. Every six weeks, a Vascular Medicine fellow will be responsible for a 30-minute, case-based presentation to the Cardiovascular Division.

- B. On Thursday at 1:00 p.m., in the Anesthesia Conference Room, Cardiovascular **Grand Rounds** are held. This is a combined lecture-seminar-case presentation series that extends from mid-September to mid-June and features local as well as invited speakers.

SPECIALTY CONFERENCES INCLUDE:

- A. The **Vascular Surgery Teaching** Conference is held each Tuesday at 5:00 p.m., in the A3 Conference room.

RESEARCH TRAINING

Each Vascular Medicine trainee spends a minimum of 24 months devoted to mentored research training. In addition to fellows in the traditional cardiovascular training program, 60-70 research fellows receive research training from Cardiovascular Division staff members annually. These postdoctoral fellows include those with prior PhD, MD, or MD/PhD degrees.

The research laboratories of the Cardiovascular Division occupy a total of about 20,000 square feet, with an additional area of approximately 5,000 square feet devoted to clinical research activities including cardiac catheterization - angiography laboratories, facilities for radionuclide studies, and the Echocardiography Laboratory.

The structure of the clinical research portion of the vascular fellowship program is based upon the thesis that the most important aspect of postdoctoral research training is the intense involvement of fellows with faculty preceptors. Fellows entering the program will have the opportunity to choose among a wide range of active clinical research programs for their investigative efforts. Individual experiences and interest, together with discussions with staff and faculty members, will provide the necessary basis for fellows to make their initial choices of research project and preceptor. It is expected that by the spring of the principal clinical year, fellows will have identified a preceptor with whom to work on investigative projects during the ensuing research period. Flexibility will be maintained, however, allowing trainees the latitude to change projects and/or preceptors if this is in the best interests of the trainee. It should be stressed that in most instances, trainees will have close involvement with other faculty participants in addition to the primary preceptor. This is inevitable in view of substantial overlapping of interests and collaboration among involved laboratories.

There are several opportunities for fellows to acquire formal didactic training in clinical research. The Harvard School of Public Health offers a **Program in Clinical Effectiveness** (PCE) that is designed to train clinicians in the quantitative skills needed to design, perform, and analyze clinical research. It features a unique intensive seven week summer curriculum that includes two core courses: *Introduction to Clinical Epidemiology* and *Biostatistics*. Elective courses in Decision Analysis in Clinical Research, Quality Improvement in Health Care, Linear and Longitudinal Regression, Survey in Methods in Health Services Research, Medical Informatics, Using Large Databases for Research and others are available. Graduates of the initial summer PCE curriculum receive 15 credits towards a 40-credit Masters degree. Typically, students take second summer courses for 10-15 additional credits. The remainder credits are gained by taking one course per semester during the usual academic year, over a two-year period. Course work beyond the initial Program in clinical effectiveness emphasizes more advanced skills in biostatistics, epidemiology, and decision sciences. We believe that the Fellows who will participate in the Vascular Medicine Career Development Program will find the Program in Clinical Effectiveness an ideal spring board into their mentored research projects. They will find a community of professors and colleagues who share their goals and who can help propel them into successful academic careers.

The Scholars in Clinical Science Program (SCSP) is a post-graduate training program in clinical research. The SCSP is designed mainly for individuals in Harvard fellowship training programs. Trainees who adequately complete the two-year program are awarded a Master of Medical Sciences degree from Harvard Medical School. The specific focus is on in-depth training for individuals interested in pursuing careers in translational research (human physiology/pathophysiology and genetics), human pharmacology, and/or clinical trials. Because clinical research now requires multi- and interdisciplinary interaction across many departments and various cultures of biomedicine—academia, industry, and government—a required course at the Harvard Business School offers additional training in management and leadership skills so that SCSP graduates can be effective leaders of complex research groups, academic departments, academic medical centers, and industrial and managed-care groups. Additionally, the SCSP is intended to complement the well-established Clinical Effectiveness Program at the Harvard School of Public Health. The SCSP consists of three parts—(1) a formal didactic curriculum comprised of eight required courses, (2) a weekly longitudinal clinical research seminar series, and (3) a mentored clinical research project. Accepted applicants choose a track of study upon matriculation—translational research, human pharmacology, or clinical trials. Students who complete the requirements receive a Master of Medical Sciences degree from Harvard Medical School. The required courses are:

Biostatistics and Clinical Epidemiology which are held in conjunction with the Program in Clinical Effectiveness

Introduction to Human Investigation

Principles of Pharmacology for the Clinical Investigator

Fundamental Methods of Clinical Trial

Genetics in Clinical Investigation

Advanced Biostatistics

Applied Regression for Clinical Research

The Center for Clinical Investigation offers a series of courses for clinical investigators throughout the year. These courses are not intended to replace the formal coursework offered through the Program in Clinical Effectiveness or the Scholars in Clinical Science Program. However, the trainee may elect to attend selected seminars that supplement the formal coursework described above and enable him/her to acquire information that will facilitate the conduct of clinical research at this institution. Among the courses and seminars offered are: Introduction to Clinical Research, Introductory Statistics for Medical Researchers, Introductory Seminar in Epidemiology, Genetics and Genomics for Clinical Investigators; The Health Care Insurance Portability and Accountability Act (HIPAA), Institutional Review Board Issues; Research Patient Data Registry; and the Research Study Volunteer Program.

The Partners Program in the Responsible Conduct of Research consists of one 4-hour session and has been specifically prepared by Partners Health Care Systems, the parent organization of Brigham and Women's Hospital and Massachusetts General Hospital. The program is case-based and includes presentations and discussions on: research integrity and misconduct; Partners codes and policies on research integrity; Harvard Medical School policies on integrity in science; reporting research results; peer review; ownership/sharing of data; financial conflicts of interest; and human subjects in research.

Mentored Research Experience

We view the mentor-mentee relationship as one of the most important aspects of this Program. Two mentors, a primary and secondary mentor, will be assigned to each trainee. The mentors will play a major role in the career development of the trainee. The secondary mentor will complement the primary mentor and contribute importantly to the trainee's clinical and/or research training by providing a skill set distinct from that of the primary mentor. Assignment of mentors will take place during the first year of training. The matching of mentors and trainee will depend upon the trainee's research interests and direction. The trainees will have an opportunity to meet with each of the program's mentors to ascertain which pairing offers the best potential for clinical research training.

The primary mentor is expected to serve as a role model for the trainee and be committed to his/her professional and personal development. In particular, the primary mentor will guide the trainee as he/she progresses toward independence as an academic Vascular Medicine clinician-scientist. The mentor will educate and guide the trainee in the many aspects of clinical investigation. The mentor will discuss ethical issues relevant to scientific research. The mentor will counsel the trainee on scientific method, helping him/her consider important scientific questions, review the relevant literature, formulate a hypothesis and develop a research plan. The mentor will ensure that the trainee acquires the laboratory skills requisite to performing the research and the analytical skills necessary to measuring outcomes and interpreting results. This instruction will supplement the didactic coursework in clinical research described above. In order to better understand scientific method and learn laboratory techniques, the trainee first will participate in one or more of the mentor's ongoing projects. During this time, and under the mentor's tutelage, it is expected that the trainee will design an independent research proposal. Thereafter, the trainee is expected to conduct the experiments of his/her independent project and perform the analyses. An important part of the clinical research process will take place during individual meetings with the mentor and at the mentor's laboratory meetings where the trainee will periodically discuss the project. The mentor will assist the trainee in identifying appropriate venues for scientific presentations and teach the trainee how to communicate research findings at scientific meetings. Also, the mentor will counsel the trainee on manuscript preparation and critically review all manuscripts prior to submission. A fundamental part of this training program is teaching the trainee how to prepare cogent and clear grant applications for future funding.

Arrangements also will be made for women and underrepresented minorities to meet and receive counsel and advice from other faculty members who can address special issues in career development related to race, ethnicity and gender. The Office for Diversity and Community Partnership at Harvard Medical School offers programs for career development, seminars, and mentoring opportunities that are particularly relevant to minority trainees and junior faculty.

APPLICATION REQUIREMENTS

The candidates for Vascular Medicine training should be individuals with MD, DO, or MD, PhD degrees who are completing or have completed internal medicine residency or cardiovascular fellowship training programs and are interested in a career in investigative academic medicine. This may include cardiovascular trainees who have completed 24 months of core clinical cardiology training who wish to extend their clinical and research training to vascular medicine. Individuals who have received training in related medical subspecialties such as hematology, rheumatology and nephrology also are eligible. As the intent of this program is to prepare clinicians for academic leadership roles in mentoring and clinical research in vascular medicine, and because there are many academic training opportunities for vascular surgeons and radiologists, selection will focus on candidates with a background in internal medicine. These other backgrounds, however, may be considered in special circumstances.

Applicants must be citizens or non-citizen nationals of the United States, or be lawfully admitted to the United States for permanent residence (in possession of a current valid Alien Registration Receipt Card I-155 or other legal verification of such).

Applicants must not be or have been a Principal Investigator on an R01 or R21 award or on a component of a Program Project (P01), Center grant (P50, P60, or U54), mentored career development (K-series) grant, or other equivalent research grant award. However, those that may have had support on a NRSA grant (F or T) and/or NIH small grant (R03) would be eligible.

Each applicant must submit a completed application form, personal references from three faculty members with whom the applicant has worked, and a curriculum vitae to the Program Director, Dr. Creager. The application must include a personal statement of short and long term career goals and state how enrollment in the Vascular Medicine Career Development program will help to achieve these goals. Such a statement permits the Admissions Committee to assess the candidate's vision, commitment, and quality of thought. It will also alert us to types of support each candidate might need and direct us to appropriate mentors and technologies to facilitate their career vision.

Interviews with advisory committee and mentors

Applicants will be selected and invited for interviews on the basis of their applications. Each applicant will be interviewed by the Program Director, at least two members of the Vascular Medicine Advisory Board and/or faculty mentors to determine his/her interest, suitability, and commitment to a career in academic clinical investigation and mentoring in Vascular Medicine.

Identification of qualified candidates

The qualification of each candidate will be determined on the basis of previous clinical and academic performance, prior research experience and publications, personal references and the interview. We believe that applicants who have excelled in these areas will be most likely to

succeed in our program and pursue a career in academic Vascular Medicine. Applicants will be ranked by the Program Director and the Advisory Committee. Candidates then will be contacted by the Program Director and informed of the decision. The highest ranked candidate(s) who accept(s) the position for Vascular Medicine training will be selected. To apply, applicants should fill out the application form, obtain three references including one from the applicant's current program director, and attach a curriculum vitae.

We hope the information in this brochure has been helpful in your consideration of our fellowship program. Please feel free to contact us if you have further questions regarding the training program or application process.

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