The overall goal of fellowship training in the Section of Pulmonary and Critical Care Medicine is to train physicians for a career in academic pulmonary medicine defined broadly. Upon completion of the three-year fellowship, the individual should be competent in clinical pulmonary and critical care medicine, will have participated in both informal and formal teaching activities with medical students and residents, and will have participated in at least one research project (from hypothesis generation to statistical analysis).

Program Objectives
The objectives of the fellowship program in Pulmonary and Critical Care Medicine focus on the achievement of excellence in clinical pulmonary and critical care medicine, teaching skills, and research activities in the broad area of respiratory pathophysiology. Upon successful completion of the three-year training program, the individual will be board-eligible for certification in the subspecialties of Pulmonary Disease and Critical Care Medicine.

Program Curriculum

Clinical
The fellow will participate in 18 months of clinical responsibility. Six months of inpatient consultations will take place at Mary Hitchcock Memorial Hospital, and six months of inpatient consultation will take place at the Veterans Administration in White River Junction, Vermont. The 12 months of inpatient consultation will be distributed over the three-year fellowship. We emphasize flexibility in scheduling this time.

The six months of Critical Care Medicine will be scheduled into 1-2 month blocks during the first 18 months of fellowship training. This allows the individual to have developed some expertise in pulmonary diseases and procedures assuming the increased responsibilities of a multi-disciplinary medical-surgical Intensive Care Unit.

In addition, each fellow will participate in two one-half day outpatient clinics throughout the fellowship period. One outpatient clinic will take place at the Hitchcock Clinic, and the other will take place at the Veterans Administration Hospital. All initial pulmonary outpatient evaluations will be presented to a faculty member for discussion and review. Thereafter, the fellow assumes primary responsibility for the patient; a faculty member is available for further discussions and assistance. The fellow may also see patients with cystic fibrosis (CF) at the monthly multidisciplinary CF clinic. He/she will work in the sleep laboratory and the cardiopulmonary exercise laboratory during elective time.

Didactic
There are 1-2 scheduled specialty conferences per week in addition to the usually scheduled Morbidity and Mortality Conference on Wednesday and Medical Grand Rounds on Friday morning. Conferences include interesting case presentations, chest radiology, a monthly journal club which includes specific topics and/or recent journal articles. The fellow is encouraged to attend the weekly multidisciplinary Thoracic Oncology Conference which evaluates new patients with lung cancer.

In addition, the second-year fellow is encouraged to attend the physiology lectures for second-year medical students as part of the Scientific Basis of Medicine during six seeks from mid-August to the end of September of each year.

During ICU rotations the fellow will attend daily radiology “rounds” and the daily didactic sessions. The fellow will be expected to present material at the didactic sessions.

Caseload
The fellow will be responsible for approximately 5-10 inpatients per day during consultation months along with an attending pulmonary physician. In addition,
the fellow will participate in an average of ten new inpatient consultations per week during hospital rotations. During the 12 months of inpatient consultation time, the fellow will participate in approximately 75 bronchoscopies, 10 thoracenteses, and will interpret numerous pulmonary function tests including measurement of flow rates, lung volumes, diffusing capacity, and methacholine bronchoprovocation challenge testing. Interpretations of cardiopulmonary exercise tests and sleep studies will occur during elective time.

Faculty

James C. Leiter, MD
Professor of Physiology and Medicine.
MD - Dartmouth Medical School. Internship: Strong Memorial Hospital, Rochester, NY. Residency: Strong Memorial Hospital. Fellowship: Dartmouth Medical School (Physiology); Dartmouth-Hitchcock Medical Center (Pulmonary Disease). Areas of Special Interest - Obstructive Sleep Apnea; Disorders of Respiratory Control; Adaptations to High Altitude; Comparative Physiology.

Donald A. Mahler, MD
Professor of Medicine.
MD - Loyola University of Chicago School of Medicine. Internship: Santa Clara Valley Medical Center, Stanford University. Residency: Dartmouth-Hitchcock Medical Center. Fellowship: Yale University School of Medicine, New Haven, CT. Areas of Special Interest - Exercise Performance in COPD; Dyspnea; Director, Pulmonary Function Laboratory.

Harold L. Manning, MD
Associate Professor of Medicine.
MD - Johns Hopkins University. Internship: Bellevue Medical Center, New York University. Residency: Bellevue Medical Center, New York University. Fellowship: Pulmonary - Beth Israel Hospital, Brigham and Women's Hospital, and West Roxbury VA Medical Center, Boston, MA. Critical Care - University of Pittsburgh, Pittsburgh, PA. Areas of Special Interest - Dyspnea; Control of Ventilation; Respiratory Muscles.

H. Worth Parker, MD
Associate Professor of Medicine.
MD - University of North Carolina. Internship: Dartmouth-Hitchcock Medical Center. Residency: Dartmouth-Hitchcock Medical Center. Fellowship: Dartmouth-Hitchcock Medical Center. Areas of Special Interest - Diseases of the Pleura; Cystic Fibrosis; Director, Graduate Medical Education.

Thomas J. Prendergast, MD
Associate Professor of Medicine.
MD - University of California, San Francisco. Internship: Brigham and Women's Hospital, Harvard University. Residency: Brigham and Women's Hospital, Harvard University. Fellowships: Cardiovascular Research Institute, Program in Ethics, and Department of Epidemiology and Biostatistics, University of California, San Francisco. Areas of Special Interest - Critical Care; End-of-Life Care; Medical Ethics; Outcomes Research.

Peggy M. Simon, MD
Associate Professor of Medicine and Physiology.
MD - Medical College of Wisconsin. Internship: Barnes Hospital, Washington University. Residency: Barnes Hospital, Washington University. Fellowship: Brigham and Women's Hospital, Beth Israel Hospital, West Roxbury VA Medical Center, Boston, MA. Areas of Special Interest - Respiratory Control; Dyspnea; COPD; Noninvasive Mechanical Ventilation; Critical Care.

Application Procedures
Selected individuals will be invited for an interview in the spring of the year preceding the anticipated start of fellowship training.

The Section of Pulmonary and Critical Care Medicine participates in the National Resident Matching Program.

Please direct application and request for interviews to:

Thomas J. Prendergast, MD, Fellowship Director
Pulmonary and Critical Care Medicine - 3-D
Dartmouth-Hitchcock Medical Center
One Medical Center Drive
Lebanon, NH 03756-0001

603/650-5533 telephone
603/650-4437 fax