Pediatric Neurology Fellowship

About The Fellowship
Our pediatric neurology fellowship provides exceptional training in clinical pediatric and adult neurology, along with the opportunity for clinical or basic science research in the neurosciences. We aim to provide our residents with exposure to all aspects of subspecialty neurology and neuroscience with increasing autonomy, and the tools necessary to become outstanding pediatric neurologists. We strive to remain flexible as educational goals evolve with healthcare, in order to address all aspects of training necessary to coordinate patient care for children with neurologic disease. We are committed to providing residents with a structured curriculum to achieve our training goals.

Hospital Facilities
Our residents rotate at three institutions: NewYork-Presbyterian/Weill Cornell Medical Center, Memorial Sloan Kettering Cancer Center and the Hospital for Special Surgery.

NewYork-Presbyterian/Weill Cornell Medical Center (NYP/WCMC) is among the top-ranked clinical and medical research centers in the country. The majority of a resident’s clinical time is spent at NYP/WCMC, which includes NewYork-Presbyterian Phyllis and David Komansky Children’s Hospital. Our Neurology Department houses a 30-bed adult neurology ward including six video-EEG monitored beds, a four-bed adult neurology step-down unit, an 11-bed neurological intensive care unit, an adult neurology outpatient clinic, and a recently constructed neuropathy center. The Pediatrics Department features a 30-bed pediatric ward including four video-EEG beds, a 20-bed pediatric intensive care unit, a 50-bed neonatal intensive care unit, two well-newborn nurseries comprised of 68 beds including an eight-bed continuing care unit, and a pediatric outpatient clinic.

Memorial Sloan Kettering Cancer Center (MSK) is the world's oldest and largest private institution devoted to patient care, education and cancer research. MSK facilities house a 33-bed pediatric ward, three-bed pediatric observation unit, 15-bed adult neurology ward, four-bed adult neurology step-down unit, and new pediatric day hospital with 30 beds.

The Hospital for Special Surgery (HSS) is a top-ranked hospital specializing in orthopedics and
rheumatology. HSS facilities feature: 134 beds including 18 designated pediatric beds, 25 PACU beds, an outpatient clinic area, a neurophysiology suite, a brace/helmet shop, as well as multiple areas for inpatient and outpatient rehabilitation therapy.

- Current Pediatric Neurology Residents
- Pediatric Neurology Residency & Fellowship Graduates
- Publications from Recent Graduates

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**Curriculum**

Our pediatric neurology curriculum is based on the Curriculum for Training Child Neurologists for Practice, developed by the Training Committee of the Child Neurology Society in 1998. While we should not and do not wish to set any limit on the knowledge or skills of our residents, we do believe there are basic competencies, based on knowledge and experience, which each pediatric neurologist must have. Our goal is to provide guidance, instruction and evaluation of progress as residents move toward becoming outstanding pediatric neurologists.

Throughout their training, our residents are given increased responsibility and autonomy in the development of evaluation and care plans, with the goal of independent practice. Emphasis is placed on leadership, management and team building skills in coordinating the ward and consultation services. Residents are also encouraged to participate in educational activities and research projects facilitated by attending faculty during elective time.

**Year 1 (PGY-3)**

Originally conceived of as the “adult year”, our PGY-3 year is typically made up of two months of inpatient pediatric neurology at NYP/WCMC, and nine months consisting of both inpatient and outpatient adult neurology at NYP/WCMC, MSK and HSS. During this year (and throughout all three years of pediatric neurology training) residents also follow patients for their weekly half-day pediatric neurology continuity clinics.

A typical schedule will consist of:

- Adult Inpatient and Consults (NYP/WCMC and MSK) – four months
- Adult Neurology ICU (NYP/WCMC) – two months
- Pediatric Neurology Inpatient (NYP/WCMC) – two months
- Pediatric Neurology Outpatient (NYP/WCMC) – one month
- EEG – one month
- Elective – one month
- Vacation – one month

**Year 2 (PGY-4)**

The PGY-4 year is primarily spent on the inpatient pediatric neurology service at NYP/WCMC. Time is built in for elective rotations.
A typical schedule will consist of:

- Adult Inpatient and Consults (NYP/WCMC and MSK) – one month
- Pediatric Neurology Inpatient (NYP/WCMC) – six months
- Pediatric Neurology Outpatient (NYP/WCMC) – two months
- Elective – two months
- Vacation – one month

**Year 3 (PGY-5)**
The PGY-5 year is spent in both inpatient and outpatient settings. Approximately two months are spent doing adult rotations; the rest of the year is made up of electives and required “selectives.” During this year, residents also take leadership roles managing the outpatient pediatric neurology clinic.

A typical schedule will consist of:

- Adult Outpatient (NYP/WCMC) – two months
- Psychiatry (NYP/WCMC) – one month
- Pediatric Neurology Inpatient (NYP/WCMC) – two months
- Pediatric Neurology Outpatient (NYP/WCMC, MSK and/or away rotations) – three months
- Elective – three months
- Vacation – one month

**Child Neurology Inpatient Service**
The Inpatient Neurology Service Team consists of a pediatric neurology faculty member, a pediatric neurology resident, one or two adult neurology residents (usually senior residents), and one or two medical students. The inpatient pediatric neurology service covers inpatient admissions to the pediatric neurology service and provides inpatient neurologic consultations to other pediatric service teams on request. This team also provides pediatric neurology consultations on request to patients in the emergency room.

Pediatric Neurology residents assume the role of the supervisory senior residents on the inpatient neurology service, reporting directly to the attending neurologist, and are allowed progressively more autonomy in this role as experience is gained through the training program. The residents also maintain an open line of communication with the pediatric intern and resident assigned to the patients. In the course of patient care, the pediatric neurology residents provide supervision in the management of patients, as well as communicate with patients, their families and other health staff involved in patient care.

All radiological and electrophysiological studies are reviewed with the attending neurologist in a weekly pediatric neurology/neuroradiology case care conference.

Night calls are divided equally with the adult neurology resident on rotation. Calls are taken from home, with residents coming into the hospital for acutely ill patients. There is an attending neurologist on-call every night.

**Child Neurology Outpatient Clinics**
During their training, our residents have an ongoing and broad exposure to outpatient pediatric
neurology clinics. Beginning with their first year of neurology training, and spanning the duration of the residency, our residents participate in a weekly general pediatric neurology continuity clinic. In this clinic, they are exposed to the whole range of neurologic disorders in a diverse patient population. Pediatric Neurology residents, Neurology residents rotating on pediatrics, and General Pediatrics residents rotating on neurology attend the weekly clinic. Our epilepsy nurse practitioner and a pediatric epilepsy fellow also attend each clinic. Two of our pediatric neurology faculty members staff each clinic on a rotating basis.

All patients are seen by a resident and an attending physician. The PGY-5 child neurology resident takes a leadership role in organizing and managing the continuity clinic.

Residents also see patients in faculty clinics during their outpatient rotations. These include: general neurology, pediatric epilepsy, pediatric neuromuscular, tics and Tourette, neurogenetics, headache, concussion, developmental/behavioral neurology and neurofibromatosis clinics.

**Electives**
During their training, our residents are able to participate in a broad range of inpatient and outpatient rotations. There is a great deal of flexibility, particularly in the PGY-5 year, to choose electives and design a curriculum based on a resident’s specific interests. Available electives include but are not limited to:

- dedicated research blocks (clinical, translational or basic)
- electrophysiology, with emphasis on EEG or EMG/NCS
- neuromuscularity
- epilepsy
- neurooncology
- psychiatry
- behavior/development
- physical medicine/rehabilitation
- neuropathology
- neurosurgery
- neuroradiology
- neurogenetics
- neuro-ophthalmology
- movement disorders
- neonatal neurology

**Conferences**
Residents are encouraged to attend a broad range of didactic and clinical care conferences designed to keep them informed of major developments in both the basic and clinical neurosciences. These include:

**Daily**

- a morning report for adult and pediatric neurology residents
- a noon conference series that covers a broad range of adult and pediatric neurology and neuroscience topics
Weekly

- a pediatric neurology/neuroradiology conference where inpatient and outpatient films are reviewed and cases are discussed
- neurology and pediatric grand rounds
- a pediatric neuro-oncology tumor board meeting

Monthly

- a neuropathology resident journal club
- a neuroscience journal club
- a resident board review
- a pediatric epilepsy case conference
- a pediatric epilepsy journal club
- a resident research meeting

Other regular conferences include a bimonthly child neurology/child psychiatry conference and a bimonthly child neurology/neonatal ICU conference.

Research

Pediatric Neurology fellows are expected to participate in clinical, translational or basic neuroscience research efforts as part of their training. During their third year, the results of residents’ research efforts are presented at special neurology grand rounds and, when possible, at national meetings such as the Child Neurology Society or American Epilepsy Society.

A variety of faculty research mentorships are available through the Tri-Institutional Research Training Program, which includes faculty from Weill Cornell Medicine, Memorial Sloan Kettering and Rockefeller University. Research seminars are held on a regular basis under the auspices of the Departments of Neurology, Neurosurgery and Pediatrics, and the Tri-Institutional Neuroscience Program.

Our Faculty

Dr. Zachary Grinspan
Director, Pediatric Epilepsy Program
Associate Professor of Pediatrics
Associate Attending Pediatrician
Nanette Laitman Clinical Scholar in Healthcare Policy & Research/Community Health
Associate Professor of Healthcare Policy & Research

Dr. Barry Kosofsky
Chief, Child Neurology
Horace W. Goldsmith Foundation Professor of Pediatrics
Professor of Pediatrics, Neuroscience, Neurology and Pediatric Radiology
Attending Pediatrician

Dr. Tammy Hennika
Assistant Attending Pediatrician

Dr. Eric Mallack
Assistant Attending Pediatrician

Dr. Srishti Nangia
Assistant Professor of Clinical Pediatrics
Assistant Attending Pediatrician
How to Apply

The Pediatric Neurology Residency has one training slot per year (three residents total). Pediatric Neurology residents are required to have at least two years of ACGME approved training in pediatrics, or one year of pediatrics residency training if they complete an additional year of basic neuroscience training during their residency. Most pediatric neurology applicants apply during their final year of medical school, though some apply during or after their pediatrics residency training.

All applicants interested in the Child Neurology Residency program must register with both:

- The Electronic Residency Application Service (ERAS)
- The National Residency Matching Program (NRMP)
The NRMP Code is 1492185CO.

Though we do not have a formal deadline, applications should ideally be submitted by late August. Interviews are scheduled from October through December.

**Contact Information**

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