On behalf of the program directors, teaching staff, and residents, it is our distinct pleasure to present you with the first Annual Report on Graduate Medical Education (GME). As Providence Health & Services and its affiliates evolve to meet the demands of a modern health care landscape, our graduate education programs mark a place where truly transformative care is being delivered in a way that exemplifies the values of Providence.

In this report you will find details on how our GME programs are currently implementing new models of integrated, patient-focused care and serving as incubators for innovation. By acting as catalysts for care delivery transformation, our GME programs not only spread better practice but also foster a culture of learning and inquiry throughout their ministries. Our residents and fellows help shape the care of the future.

315 residents and 12 fellows participate in our 18 Accreditation Council for Graduate Medical Education (ACGME) accredited residencies (with two new programs starting this year) and five fellowship programs among other sponsored medical education training. Together they see nearly 180,000 patient visits a year and touch countless inpatient lives. With an abundance of applicants for offerings, our programs are able to recruit compassionate physicians who practice with idealism, commitment and passion. With some of the country’s best rural training programs and commitment to the underserved, our programs continue to support our legacy of social justice.

All our sponsored residencies are certified by the ACGME and maintain a commitment to quality. Our first ACGME Clinical Learning Environment Review (CLER) site visit occurred in 2014 with excellent results. We plan to achieve the same level of excellence at our next site visits.

With a growing aging population in the United States, the demand for physicians has intensified and communities around the country are experiencing doctor shortages. In the future, there will be shortages in both primary and specialty care. Part of the multi-pronged fix to the shortage revolves around training 3,000 more doctors nationally a year. In the past year, Providence has done more than its part by adding both residency and fellowship training slots along new residency programs in family medicine and psychiatry. We are the third largest training program in the Pacific Northwest. Because one-third of residents practice very close to their residency sites, investing in these programs truly ensures that essential medical personnel are available in the communities we serve and is critical to the work we are doing to create healthier communities, together.

We look forward to another excellent year of recruiting, providing quality patient care, and promoting the excellence in scholarly activity we are proud of at our unique institutions.

Sandy Norris, MBA
Swedish Health Services

Devin Sawyer, M.D.
Southwest Washington Region

Harold Johnston, M.D.
Alaska Region

Stephen Salerno, M.D.
Oregon Region

Bob Maudlin, Pharm D
Providence Health Care
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Growing the Next Generation of Providers

Multidisciplinary care teams have been recognized as an important part of comprehensive care for many years; however, recently their central role has increased in importance. Multidisciplinary teams including physicians, nurses, pharmacists, patient navigators and others help to ensure a collaborative approach along a patient’s treatment pathway. Residencies, including those at Swedish, and in Alaska and Olympia, have been some of the first locations to successfully implement a care team. Residents who become adept at leading team-based care are more collaborative throughout their medical careers.

Multidisciplinary Care Team at St. Peter Family Medicine

“Learn together. Grow together.” This simple phrase has powerful potential in the delivery of patient-centered services. At St. Peter Family Medicine Residency Clinic growing together means breaking down the educational silos keeping students of one discipline separate from those of another. This residency program is using an integrated model of behavioral health, pharmacy, acute case management and residents all caring for the same patients under one roof.

From the patient’s perspective, a single visit could include a consult from a behavioral health specialist, tips on insulin use from a pharmacist resident, a quick check-in from an RN case manager about a recent hospitalization, and a visit with their doctor for their annual checkup. Devin Sawyer, M.D., program director, says “my job is to really make the benefits of the medical home model come to pass for both the patients and our students.” The cross-fertilization that happens between clinical disciplines is much stronger when all providers truly work together as a team to enhance patient care.

The benefits for the patient include shorter timeframes from diagnosis to treatment, a greater likelihood of receiving care in accordance with clinical practice guidelines, greater psychosocial support, increased access to information about their health conditions, and improved satisfaction with treatment and care. In addition, patients served by a multidisciplinary care team tend to live longer. This team-based approach can influence the resident’s practice preferences for a lifetime, creating longstanding health benefits for the communities we serve.
Over 180,000 Patient Encounters
Improving the Quality of Care

Residents play a key role in patient care. As trainees, they spend countless hours in the hospital and have unique insights into issues they observe. Yet, as the junior-most members of the medical team, they are not always optimally involved in efforts to improve care. To remedy this, residents take on formal quality projects and many are getting involved beyond those projects. Some sites have gone further with active membership on safety councils.

**Swedish Quality and Safety Council**

The GME Quality and Safety Council (QSC) at Swedish is a venue to promote resident engagement with Quality and Safety efforts. Launched in early 2013, this resident-driven group meets monthly with Swedish clinical and administrative leaders to address hospital-wide issues and promote quality improvement projects focused on improving care and safety.

A recent highlight involves the development and refinement of an Epic-based handoff/rounding report for Family Medicine and Surgery. This project was conducted in collaboration with informatics and allows for auto-population of pertinent data (i.e. meds, labs, vitals, etc.) which was previously manually populated by residents. A survey conducted three months after implementation indicated that 85 percent of residents felt the reports improved accuracy and made sign-out safer.

Quality variance reports are reviewed at the monthly QSC meetings, allowing for identification of high priority improvement areas and opportunities for interested residents to engage in investigations through a Focused Case Review process. One recent case led to the revision of Health Care Agreement (HCA) processes to create a more patient-centered HCA and ensure adequate training and support for residents as they facilitate important conversations between patients and their care team.

Finally, the group has been working to develop a quality and safety curriculum that will be piloted in 2015-16. The curriculum includes required didactics in quality, safety and health care disparities led by quality and safety leaders at Swedish, along with optional 1.5 day workshops on Lean/Six Sigma for interested residents and faculty to learn practical skills in process improvement.

Emily Peterson, M.D.

Participating in the meetings reminded me regularly how connected we all are in the hospital and how important each person is in assuring patient safety. It was a pleasure to invite guests from various backgrounds including infectious disease physicians, nursing leads, social workers and palliative care doctors to collaborate and work together on how to improve the care of our patients at Swedish. We learned a great deal about the flow of patient care during our discussions and how important communication among all specialties is. It was inspiring to me to see how passionate members of our community at Swedish are about caring for patients and how eager they are to adapt to procedural changes, promote communication, and troubleshoot problems encountered on the floor.
Providing Care to the Under-served Effectively and Efficiently

Our GME programs are committed to addressing the needs of the under-served and designing strategies to improve availability of health care to everyone in the community. Special outreach occurs at all of our teaching sites reaching from the native communities in Alaska to the underserved Hispanic population in Los Angeles County.

Swedish Family Medicine Serving the Underserved

As one example, Swedish Family Medicine Cherry Hill provides innovative care to the under-served through a number of partnerships. King County has a diverse ethnic makeup that exposes the clinic to over thirty languages and many more cultural backgrounds. Driven by the needs of their patients, the residency program has forged unique partnerships with Sea Mar Community Health, Seattle Indian Health Board and the Carolyn Down’s Family Health Center to offer care to those most in need.

Partnerships have been a great way that Swedish has met the needs of the community. For instance, addiction disorders affect about 10 percent of the population they serve and account for up to 15 percent of Swedish hospital admissions. In response, the residency program has partnered with many sites, including Evergreen Treatment Service’s methadone maintenance program and the Chemical Using Pregnant Women’s Program (CUPW) to provide a critically important addiction medicine family medicine fellowship. This unique environment allows the fellows to learn everything from opiate maintenance treatment, to pain management, to detoxification. The fellow also participates in the obstetric care of women with substance use issues. Every year, the fellow and residents deliver more than 100 babies for mothers in the program addressing a vital population health need.

Another key partnership has been with Sea Mar Community Health. In 1987 Swedish began a satellite Family Medicine residency clinic at Sea Mar Community Health Center. Dedicated to the care of the medically underserved and the Latino population of Seattle, this pioneering collaborative supports excellent training for residents while providing a critical resource to the community. The program has grown over the years and now offers mental health treatment, addiction treatment, maternal support services, WIC enrollment, dental care, preventive health services and a variety of other programs.
Serving as a Learning Lab for Innovation

Our GME programs are natural labs for innovation. Residents bring fresh perspectives to enduring problems and are eager to find ways to interact with the health system and serve patients in increasingly better ways. The broader system has an opportunity to utilize the residency programs more effectively as learning labs for innovation across a variety of scenarios.

Accountable Care Unit at Providence St. Vincent Medical Center

At Providence St. Vincent Medical Center, implementing an accountable care unit was a way to address patient needs while dealing with common problems in coordinating team-based inpatient care. “We want our patients to focus on healing, not the logistics of care,” says Laura Loertscher, M.D., co-director of the accountable care unit. The accountable care unit combines the internal medicine residency program with the 7W team to form a single unit. The unit launched in late August as part of the hospital’s ongoing acute care transformation and in a partnership with Emory University Hospital. At Emory, this model of care has demonstrated remarkable improvements, including a 53 percent reduction in mortality and a 10 percent reduction in length of stay.

From a training standpoint, the accountable care unit helps residents gain the clinical skills and judgment, as well as the communication and management abilities, to lead a care team.

With one geographic unit for the team, time otherwise spent moving from unit to unit can be invested in building relationships. Those little bits of time each day add up to better care for the patient in a multitude of ways.

The shifts in the culture of medicine require innovating for the future. One such innovation is the Structured Interdisciplinary Bedside Rounds (SIBR). This tool allows for timely feedback from the patient and shared ownership in successes and failures in patients’ care.

Another innovation is a system of resident feedback called 360 Evaluations. Although it is easy to say effective and timely feedback is a critical component of a successful patient care, it’s a lot harder to do. The 360 Evaluations allow for the entire care team to evaluate a resident as a leader of care.

In future payment models, team-based multidisciplinary medicine will be a necessary part of the care landscape. By allowing the residents to truly live and work as part of a team-based unit, we are uniquely preparing our students for the future of medicine.
Promoting a Culture of Learning and Inquiry

One of the great benefits of graduate medical education to the broader organization is the way it promotes a culture of learning and inquiry. This fosters an environment where critical thinking and continuous improvement are valued and caregivers are constantly thinking about ways to improve care delivery. This is further enhanced for residents who participate in unique experiences like international health programs and rural residency tracks. Through these programs, residents across the system have the opportunity to expand their educational experience beyond traditional training sites. Although sites vary, the experience of providing medicine in a non-traditional setting has lasting benefits beyond the residents who participate.

International Health Track

Twenty years ago when Providence Portland Medical Center started their first international residency program in Kenya, the residents left seeking frontier medicine. Although the group encountered open-air rooms stacked sixteen patients deep with two patients per bed, it wasn’t the setting that was eye opening. Instead, the real revelations came from how providers adapt their practices to practice the best medicine possible given such resource constraints.

“We want to break our residents open and remold them with our International Health Track,” says Marc Koenig, M.D., director of the international program. International residencies teach our students three important lessons – first is the importance of the physical exam; second is the true meaning of cost effective care; and third is cultural sensitivity. These are all essential skills in finding a place in the modern health care landscape.”

Bi-directionality is also an important component of the International Health Track, with residents not only traveling abroad, but international students also participating in the care we provide. Even the best international program is a relatively short emersion. With the two-way exchange, residents carry on the learning process for a much longer time, while sharing the benefits with a wider pool of staff.

This is consistent with the goals of the Providence as outlined by the Sisters in the Hopes and Aspirations document, “We expect them to reach beyond the borders of our own country as global citizens exemplified through the witness of Providence International Missions.” It is through educational exchanges that we meet the needs of our global village.
Spokane Family Medicine Residency Rural Training Track

Residency location has a strong influence on where a doctor will practice. For 69 percent of residents, location is the primary selection factor when committing to their first position after completing residency. Over a third of residents end up practicing within 50 miles of their program site. That’s why rural training tracks are so important. Providence Sacred Heart Medical Center in Spokane, Washington, like our programs in Alaska, Southwest Washington, Oregon and at Swedish, offers residents the ability to practice in rural communities that are in the most need of doctors. This provides much-needed medical services in these communities today and for years to come, as many residents choose to establish their practices in these same communities.

Spokane Family Medicine Residency has led the way in developing a successful rural training track. In 1985, the Spokane residency developed the one-two rural training model. In this model the first year of residency is completed in an urban setting, and the second and third years are completed at a rural site. This model has been highly effective in placing and maintaining physicians. More than 77 percent of Sacred Heart’s rural training track graduates end up in rural communities (well above the national average). Former graduates now serve communities in Washington, Alaska, Idaho and Oregon.

Advocating for the Future of Graduate Medical Education

Providence and our affiliate organizations are deeply committed to teaching and developing new generations of physicians, nurses and other health care providers. As such, Providence has been a strong advocate for preserving the Graduate Medical Education system, along with exploring new policy ideas to expand residency programs to reflect new models of care and population health goals.

Working with national organizations, Providence advocated for loan repayment policies, grants and other mechanisms to increase the supply of physicians and nurses included in the Affordable Care Act. In 2014, our advocacy helped reauthorize and extend the ACA-established Teaching Health Center grant program. GME reform is expected to be a top advocacy priority in 2016, as Congress looks to address concerns with the Medicare-funded GME system’s efficiency and hospital-centric orientation as well as identify ways to increase the physician supply to meet the demands of the ACA coverage expansion.

For more information contact: Steve Brennan at Steven.Brennan@providence.org
Programs and Contacts:

I. GME PROGRAMS IN THE ALASKA REGION - (ALASKA)

DIO: Harold Johnston, M.D.
(907) 212-8339
Harold.Johnston@providence.org

Assistant: Anicia Vo
(907) 212-6002
Anicia.Vo@providence.org

1. Providence Alaska Family Medicine Residency
   http://akfmr.org/

   Director: Anne Musser, M.D.
   (907) 562-9229
   Anne.Musser@providence.org

   Primary Locations: Providence Alaska Medical Center, Alaska Native MC
   Number of Residents: 36
   Length of Training: 3 years
   Affiliation: UW School of Medicine
   Accreditation Status: ACGME and AOA

2. Providence Alaska Hospice and Palliative Medicine Fellowship
   http://alaska.providence.org/choose/mission/Pages/hpmf.aspx

   Director: Tram Chu, M.D.
   (907) 212-8580
   Tram.Chu@providence.org

   Primary Location: Providence Alaska Medical Center
   Number of Fellows: 1
   Length of Training: 1 year
   Affiliation: UW School of Medicine
   Accreditation Status: ACGME
3. Ambulatory Pediatrics Track
   http://www.seattlechildrens.org/healthcare-professionals/education/uw-peds/training/alaska-track/

   Director: Christine Tan Cadogan, M.D.
   (907) 273-9349
   christinetan@msn.com

   Primary Locations: PAMC, Alaska Native MC, Tanana Valley Clinic, YK Delta Regional Health Co.
   Number of Residents: 4
   Length of Training: 3 years
   Affiliation: UW School of Medicine / Seattle’s Children’s Hospital

II. GME PROGRAMS IN THE PROVIDENCE HEALTHCARE REGION – (GREATER SPOKANE)

   DIO: Robert Maudlin, Pharm.D.
   (509) 624-2313
   Robert.Maudlin@providence.org

   1. Providence Health Care Transitional Year Program
      http://spokane.wsu.edu/sthc/transitional-year-residency/

      Director: Danielle Wolff, M.D.
      (509) 473-2514
      Danielle.Wolff@providence.org

      Primary Location: Providence Sacred Heart Medical Center
      Number of Residents: 18
      Length of Training: 12 months (13 four-week rotations)
      Accreditation Status: ACGME

   2. Providence Health Care Radiology Residency
      http://washington.providence.org/shared/spokane-medical-education-residency-programs/radiology-residency/

      Director: Gordon Teel, M.D.
      (509) 474-3021
      gteel@inlandimaging.com

      Primary Location: Providence Sacred Heart Medical Center
      Number of Residents: 8
      Length of Training: 4 years
      Accreditation Status: ACGME
3. Providence Health Care Psychiatry Residency  
http://spokane.wsu.edu/sthc/psychiatry-residency/  

Director: Tanya Keeble, M.D.  
(509) 474-4744  
Tanya.Keeble@providence.org  

Primary Location: Providence Sacred Heart Medical Center  
Number of Residents: 3  
Length of Training: 4 years  
Accreditation Status: ACGME  

4. Providence Health Care Internal Medicine Residency  
http://spokane.wsu.edu/sthc/internal-medicine-residency/  

Director: Judy Benson, M.D.  
(509) 474-3022  
Judy.Benson@providence.org  

Primary Location: Providence Sacred Heart Medical Center  
Number of Residents: 27  
Length of Training: 3 years  
Affiliation: University of Washington  
Accreditation Status: ACGME  

5. Providence Health Care Family Medicine Residency and Rural Training Track in Colville, WA  
http://spokane.wsu.edu/sthc/family-medicine-residency/  

Director: Gary Newkirk, M.D.  
(509) 624-2313  
Gary.Newkirk@providence.org  

Primary Location: Providence Sacred Heart Medical Center, Providence Mt. Carmel Hospital  
Number of Residents: 27 + 3 Rural Training Track  
Length of Training: 3 years  
Affiliation: University of Washington  
Accreditation Status: ACGME
6. Providence Health Care Family Medicine Sports Medicine Fellowship
http://spokane.wsu.edu/sthc/family-medicine-residency/fellowship/sports-medicine.html

Director: Edward Reisman, M.D.
(509) 624-2313
Edward.Reisma@providence.org

Primary Location: Providence Sacred Heart Medical Center
Number of Fellows: 1
Length of Training: 1 year
Accreditation Status: ACGME full

7. Providence Health Care Family Medicine Surgical Obstetrics Fellowship

Director: Karen Wildman, M.D.
(509) 624-2313
Karen.Wildman@providence.org

Primary Location: Providence Sacred Heart Medical Center
Number of Fellows: 2
Length of Training: 1 year
Accreditation Status: TBD
III. GME PROGRAMS IN THE OREGON REGION – (OREGON)

DIO: Stephen Salerno, M.D.
(503) 215-0694
Stephen.Salerno@providence.org

GME: Manager: Kelley McCarty
(503) 215-0694
Kelley.McCarty@providence.org

1. Providence Alaska Family Medicine Residency
   http://akfmr.org/

   Director: Anne Musser, M.D.
   (907) 562-9229
   Anne.Musser@providence.org

   Primary Locations: Providence Alaska Medical Center, Alaska Native MC
   Number of Residents: 36
   Length of Training: 3 years
   Affiliation: UW School of Medicine
   Accreditation Status: ACGME and AOA

2. Providence Alaska Hospice and Palliative Medicine Fellowship
   http://alaska.providence.org/choose/mission/Pages/hpmf.aspx

   Director: Tram Chu, M.D.
   (907) 212-8580
   Tram.Chu@providence.org

   Primary Location: Providence Alaska Medical Center
   Number of Fellows: 1
   Length of Training: 1 year
   Affiliation: UW School of Medicine
   Accreditation Status: ACGME
3. Providence Oregon Family Medicine Residency

   Director: Glenn Rodriguez, M.D.
   (503) 513-8935
   Glenn.Rodriguez@providence.org

   Primary Location: Providence Milwaukie Hospital
   Number of Residents: 21
   Length of Training: 3 years
   Affiliation: OHSU
   Accreditation Status: ACGME Continued Accreditation

4. Providence Hood River Family Medicine Program

   Program Director: Robert Gobbo, M.D.
   (503) 215-9850
   Robert.Gobbo@providence.org

   Primary Location: Providence Hood River
   Number of Residents: 6
   Length of Training: 3 years
   Affiliation: OHSU
   Accreditation status: ACGME Initial Accreditation

5. Providence Hepatobiliary and Pancreatic Fellowship

   Program Director: Paul Hansen, M.D.
   (503) 215-6724
   phansen@orclinic.com

   Primary Location: Providence Portland Medical Center
   Number of Fellows: 2
   Length of Training: 2 years
   Accreditation Status: Fellowship Council
IV. GME IN THE SOUTHEAST WASHINGTON REGION (WALLA WALLA/RICHLAND AREA)

DIO: Dale Hoekema, M.D.
(509) 942-2811
dale.hoekema@kadlec.org

GME Director: Amy Carrasco
(509) 942-2028
amy.carrasco@kadlec.org

1. Kadlec Family Medicine Residency

   Director: Erick Isaacson, M.D.
   (509) 539-6001
   erick.isaacson@kadlec.org

   Primary Location: Kadlec Medical Center, Richland
   Number of Residents: 18
   Length of Training: 3 years
   Accreditation Status: ACGME
V. GME PROGRAMS IN THE SOUTHWEST WASHINGTON REGION – (GREATER OLYMPIA REGION)

ASST DIO: Devin Sawyer, M.D.
(360) 493-7525
Devin.Sawyer@providence.org

Residency Coordinator: Lisa-Ann Roura
(360) 493-4002
lisa-ann.roura@providence.org

1. Providence St. Peter Family Medicine Residency

   Director: Devin Sawyer, M.D.
   (360) 493-7525
   Devin.Sawyer@providence.org

   Primary Location: Providence St. Peter Hospital
   Number of Residents: 21
   Length of Training: 3 years
   Affiliation: University of Washington
   Accreditation Status: ACGME

2. St Peter Family Medicine Chehalis (1-2) Rural Training Track

   Site Director: J. Miguel Lee, M.D.
   (360) 767-6305
   Juan.lee@providence.org

   Primary Location: Providence St. Peter Hospital/Providence Centralia Hospital
   Number of Residents: 6
   Length of Training: 3 years
   Affiliation: University of Washington
   Accreditation Status: ACGME
VI. GME PROGRAMS IN SWEDISH MEDICAL REGION – (GREATER SEATTLE REGION)

GME Regional URL: http://www.swedish.org/GME

DIO: Sandy Norris, MBA
(206) 386-2779
sandy.norris@swedish.org

GME Manager: Frank Basloe
(206) 386-2766
frank.basloe@swedish.org

1. Swedish Family Medicine Residency at First Hill
   http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-residency-programs/swedish-family-medicine-first-hill

   Director: Carla Ainsworth, M.D.
   (206) 386-6111
carla.ainsworth@swedish.org

   Primary Locations: Swedish Medical Center First Hill (18 residents); Downtown Family Medicine (9 residents), Ballard Community Health (6 residents)
   Number of Residents: 33
   Length of Training: 3 years
   Accreditation Status: ACGME

2. Swedish Family Medicine Residency at Cherry Hill
   http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-residency-programs/swedish-family-medicine-cherry-hill

   Director: Paul Gianutsos, M.D.
   (206) 320-2484
paul.gianutsos@swedish.org

   Primary Locations: Swedish Medical Center Cherry Hill (18 residents); Seattle Indian Health Board (6 residents), SeaMar Community Clinic (6 residents), Carolyn Downs Clinic (6 residents)
   Number of Residents: 36
   Length of Training: 3 years
   Accreditation Status: ACGME
3. **Swedish Medical Center General Surgery Residency Training Program – Categorical and Preliminary**
   
   
   Director: Marc Horton, M.D.
   (206) 386-6700
   marc.horton@swedish.org
   
   Primary Location: Swedish Medical Center First Hill
   Number of Residents: 17 Categorical – 2 Preliminary
   Length of Training: 5 years - Categorical 1 Year - Preliminary
   Accreditation Status: ACGME

4. **University of Washington Diagnostic Radiology – Internship Year**
   
   
   Director: Marc Horton, M.D.
   (206) 386-6700
   marc.horton@swedish.org
   
   Facility: SMC First Hill
   Number of Residents: 3
   Length of training: 1 year
   Accreditation status: ACGME

5. **Swedish Foot & Ankle Surgery and Medicine Program with Reconstructive Rearfoot/Ankle Surgery Residency**
   
   
   Director: Doug Hale, D.P.M.
   (206) 320-5301
   douglas.hale@swedish.org
   
   Primary Location: Swedish Medical Center Cherry Hill
   Number of Residents: 6
   Length of Training: 3 years
   Accreditation Status: Council on Podiatric Medical Education
6. **Swedish Colon and Rectal Surgery Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-residency-programs/swedish-family-medicine-first-hill  

Director: Amir Bastawrous, M.D.  
(206) 386-6600  
amir.bastwarous@swedish.org  

Facility: Swedish Medical Center / SMC First Hill  
Number of Residents: 1  
Length of Training: 1 year  
Accreditation Status: ACGME  
Participating Teaching Hospital: Northwest Hospital Medical Center

7. **Swedish Geriatric Medicine Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-residency-programs/swedish-family-medicine-first-hill  

Director: Carrie Rubenstein, M.D.  
(206) 215.2602  
carrie.rubenstein@swedish.org  

Primary Location: Swedish Medical Center First Hill  
Number of Fellows: 2  
Length of Training: 1 year  
Accreditation Status: ACGME

8. **Swedish Sports Medicine Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/sports-medicine  

Director: Michael Erickson, M.D.  
(206) 320-2484  
michael.erickson@swedish.org  

Primary Location: Swedish Medical Center Cherry Hill  
Number of Fellows: 2  
Length of Training: 1 year  
Accreditation Status: ACGME
9. Swedish General Practice Dentistry Residency
http://www.seattlespecialcaredentistry.com

Director: Bart Johnson, D.D.S.
(206) 524-1600
Bart.Johnson@swedish.org

Facility: SMC First Hill
Number of Residents: 4
Length of Training: 1 year
Accreditation Status: Commission on Dental Accreditation

10. Addiction Medicine Fellowship
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/addiction-medicine

Director: Jim Walsh, M.D.
(206) 781-6209
jim.walsh@swedish.org

Facility: SMC Ballard Addiction Recovery Unit
Number of Fellows: 2
Length of Training: 1 year
Accreditation Status: Non Accredited
Participating Teaching Hospital: Swedish Family Medicine Residency/Cherry Hill

11. Advanced Hospital Medicine Fellowship
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/advanced-hospital-medicine

Director: Elisha Yaghmai, M.D.
(206) 386-6000
Elisha.yaghmai@swedish.org

Facility: SMC First Hill
Number of Fellows: 3
Length of Training: 1 year
Accreditation Status: Non Accredited
12. **Advanced Obstetrics Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/advanced-obstetrics-for-family-medicine  

Program Director: Joe Bruener, M.D.  
(206) 296-0180  
Joe.Breuner@swedish.org  

Facility: SMC First Hill  
Number of Fellows: 5  
Length of Training: 1 year  
Accreditation Status: Non Accredited

13. **Robotic Surgery Urology Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/davinci-robotic-surgery-urology  

Program Director: Jim Porter, M.D.  
(206) 386-6266  
jporter@u.washington.edu  

Facility: SMC First Hill  
Number of Fellows: 1  
Length of Training: 1 Year  
Accreditation Status: Non Accredited

14. **Structural Heart Fellowship**  
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/interventional-cardiology-and-endovascular  

Program Director: Peter Casterella, M.D.  
(206) 215-4545  
Peter.Casterella@swedish.org  

Facility: SMC Cherry Hill  
Number of Fellows: 1  
Length of Training: 1 year  
Accreditation Status: Non Accredited
15. Integrative Medicine Fellowship
http://www.swedish.org/for-health-professionals/graduate-medical-education/swedish-sponsored-fellowship-programs/integrative-medicine

Program Director: Tanmeet Sethi, M.D.
(206) 320-2484
Tanmeet.Sethi@swedish.org

Facility: SMC Cherry Hill
Number of Fellows: 1
Length of Training: 1 year
Accreditation Status: Non Accredited

16. Organ Transplant Fellowship
Accreditation Status: ASTS Accredited

Program Director: Andrew Precht, M.D.
(206) 386-3660
Andrew.Precht@swedish.org

Facility: SMC First Hill
Number of Fellows: 1
Length of Training: 1 year

17. Neuroanesthesia Fellowship
http://www.swedish.org/services/neuroscience-institute/fellowships/cerebrovascular-fellowship

Program Director: Arthur Lam, M.D.
(206) 320-2800
Arthur.lam@swedish.org

Facility: SMC Cherry Hill
Number of Fellows: 1
Length of Training: 1 year
Accreditation Status: Non Accredited
18. **Advanced Otology Fellowship**

   Program Director: Douglas Backous, M.D.
   (206) 931-1906
douglas.backous@swedish.org

   Facility: SMC Cherry Hill
   Number of Fellows: 1
   Length of Training: 1 year
   Accreditation Status: Non Accredited

19. **Neurosurgery: Neuromodulation/Functional Fellowship**

   Program Director: Johnny Delashaw, M.D.
   (206) 320-4555
   Johnny.delashaw@swedish.org
   Facility: SMC Cherry Hill

   Number of Fellows: 1
   Length of Training: 2 year
   Accreditation Status: Non Accredited

20. **Neurosurgery: Spine Fellowship**

    Program Director: Johnny Delashaw, M.D.
    (206) 320-4555
    Johnny.delashaw@swedish.org

    Facility: SMC Cherry Hill
    Number of Fellows: 3
    Length of Training: 1 year
    Accreditation Status: Non Accredited
21. **Neurosurgery: Skull Base Fellowship**
   http://www.swedish.org/services/neuroscience-institute/fellowships/skull-base-fellowship

   Program Director: Johnny Delashaw, M.D.
   (206) 320-4555
   Johnny.delashaw@swedish.org

   Facility: SMC Cherry Hill
   Number of Fellows: 1
   Length of Training: 1 year
   Accreditation Status: Non Accredited

22. **Neurosurgery: Brain Tumor Fellowship**
   http://www.swedish.org/services/neuroscience-institute/fellowships/skull-base-fellowship

   Program Director: Johnny Delashaw, M.D.
   (206) 320-4555
   Johnny.delashaw@swedish.org

   Facility: SMC Cherry Hill
   Number of Fellows: 1
   Length of Training: 1 year
   Accreditation Status: Non Accredited

23. **Neurosurgery: Spine/Brain Tumor Fellowship**

   Program Director: Johnny Delashaw, M.D.
   (206) 320-4555
   Johnny.delashaw@swedish.org

   Facility: SMC Cherry Hill
   Number of Fellows: 1
   Length of Training: 3 year
   Accreditation Status: Non Accredited
24. Neurosurgery: Cerebrovascular/Endovascular Fellowship
http://www.swedish.org/services/neuroscience-institute/fellowships/cerebrovascular-fellowship

Program Director: Johnny Delashaw, M.D.
(206) 320-4555
Johnny.delashaw@swedish.org

Facility: SMC Cherry Hill
Number of Fellows: 2
Length of Training: 2 year
Accreditation Status: Non Accredited

25. Thoracic and Foregut Surgery Fellowship
http://www.swedish.org/services/thoracic-surgery/for-medical-professional-fellowship-residency

Program Director: Ralph Aye, M.D.
(206) 215-6800
ralph.aye@swedish.org

Facility: SMC First Hill
Number of Fellows: 3
Length of Training: 2 year
Accreditation Status: Non Accredited
VII. GROUP HEALTH COOPERATIVE – (SEATTLE)

Swedish is the Primary Site for Residents

DIO: David Kauff, M.D.
(206) 448-2736
Kauff.d@ghc.org

1. Family Medicine Residency Program

Program Director: Carl Morris, M.D., MPH
(206) 326 3585
morris.cg@ghc.org

Clinical Facility: Group Health / Seattle
Participating hospital: Swedish Medical Center/ First Hill
Number of Residents: 18
Length of Training: 3 years
Accreditation Status: ACGME
VIII. GME PROGRAM IN CALIFORNIA REGION – (GREATER LOS ANGELES AREA)

In association with St. John’s Health Center

DIO: Donald Larsen, Jr, M.D.
(310) 829-8269
Donald.Larsen@providence.org

GME Manager: Rebecca Bernstein
(310) 998-3989
BernsteinR@jwci.org

1. John Wayne Cancer Institute Surgical Oncology Fellowship
   http://california.providence.org/john-wayne/fellowship-training/surgical-oncology-fellowship/

   Director: Mark Faries, M.D.
   (310) 582-7438
   mark.faries@JWCI.ORG

   Primary Location: John Wayne Cancer Institute at Providence Saint John’s Health Center
   Number of Fellows: 4 per year (8 total)
   Length of Training: 2 years (optional 3rd for research year)
   Accreditation Status: ACGME Initial Accreditation

2. Breast Oncology Fellowship
   http://california.providence.org/john-wayne/fellowship-training/breast-oncology-fellowship/

   Acting Director: Maggie DiNome, M.D.
   (310) 582-7107
   Maggie.Dinome@providence.org

   Number of fellows: 1 per year
   Accreditation: Society of Surgical Oncology Approval

3. Neurosurgery Fellowship
   http://california.providence.org/john-wayne/fellowship-training/neurosurgical-fellowship/

   Director: Daniel Kelly, M.D.
   (310) 582-7451
   kellyd@jwci.org
   Number of fellows: 1 per year
   Accreditation: Society of Surgical Oncology Approval
OUR MISSION
As people of Providence, we reveal God’s love for all, especially the poor and vulnerable, through our compassionate service.

OUR CORE VALUES
Respect, Compassion, Justice, Excellence, Stewardship

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