



**University of California, Los Angeles
UCLA Medical Center**

**Division of Pediatric Gastroenterology,
Hepatology and Nutrition**

Pediatric Gastroenterology Fellowship Program

**Program Description
2016-17**

GASTROENTEROLOGY FELLOWSHIP TRAINING PROGRAM

INTRODUCTION

The Pediatric Gastroenterology Fellowship Program at UCLA is an ACGME accredited three-year training program that provides comprehensive training in pediatric gastroenterology, hepatobiliary diseases, nutrition support and pre- and post- liver transplant and intestinal transplant patient care. Our program is specifically directed towards individuals interested in pursuing academic careers in clinical and/or research medicine. The program is under the direction of S.V. McDiarmid, MD.

The Pediatric Gastroenterology, Hepatology and Nutrition Division is a multidisciplinary program that brings multiple specialists together to provide consultation, diagnosis and medical management of children with gastrointestinal, hepatobiliary and nutritional disorders. The Division members are nationally and internationally recognized for their expertise in IBD, hepatobiliary diseases, liver transplantation, intestinal rehabilitation and transplantation, diarrheal diseases, gastrointestinal motility disorders, nutrition support, gastroesophageal reflux, and celiac disease.

The Division has active research programs in numerous clinical and basic research areas. There are several NIH funded research projects in areas such as intestinal stem cell development, intestinal failure in children, outcomes after liver transplantation, *H. pylori* signaling systems and pathogenesis. Active clinical investigation is ongoing in several areas including: IBD, diarrheal disorders, genetics of chronic intestinal pseudo-obstruction, immunosuppression in pediatric liver transplantation.

MISSION

The UCLA Pediatric Gastroenterology Fellowship Program has three missions:

1. **Patient Care:** We strive to improve the standard of practice and ensure the highest quality of care to children in our hospital. We care for children with the highest respect for their precious lives in a family-centered, compassionate and caring environment, and utilizing evidence-based approaches to treatments that are regularly evaluated and updated.
2. **Research:** To pursue new knowledge through high quality research that explores unanswered questions and challenges and refines previously established ideas on mechanisms of disease and clinical aspects of pediatric gastroenterology. We engage in clinical, translational and basic science research, aimed at improving children's lives. We work collaboratively within and outside our institution in order to generate important discoveries that enhance medical practice and inform the medical community and the public of evidence-based approaches to pediatric gastroenterology, hepatology and nutrition.
3. **Education:** Our goal is to impart knowledge, instill excitement for learning, and translate and refine questions into focused areas of research for our trainees. We train future leaders in pediatric gastroenterology, hepatology and nutrition who work in an academic or private setting and deliver the highest quality care to their patients. We accomplish this by:
 - Allowing fellows to pursue their interests in a structured manner in order to produce quality research addressing significant questions in pediatric gastroenterology medicine.
 - Promoting a collegial environment that provides ample opportunity for fellows to grow and learn from their own and others' experiences.

UNIQUE INFORMATION ABOUT THE PROGRAM

- Training provided in an internationally renowned tertiary care medical center, Ronald Reagan UCLA Medical Center, and major children's hospital, Mattel Children's Hospital UCLA
- Outpatient service with over 7,000 patient visits per year
- Inpatient service with over 700 admissions per year and an average daily census of 12-15 patients
- State-of-the-art endoscopy and diagnostic suite with over 1,000 procedures performed per year
- Gastrointestinal motility center where the following studies are performed: esophageal motility, pH monitoring, anorectal manometry, colonic manometry, electrogastrography
- Clinical and educational programs include: general gastrointestinal diagnostic service, inflammatory bowel disease, acute and chronic liver disease, liver transplantation, intestinal rehabilitation and transplantation, home parenteral and enteral nutrition, nutrition support service, motility disorders diagnosis and management
- Direct access to other pediatric subspecialties, transplant surgeons, pediatric surgeons, radiologists, pathologists, nutritionists, psychologists, social workers, etc.

GOALS OF THE PROGRAM FOR EACH TRAINEE

The training program integrates a strong background in basic and/or clinical research with excellent clinical training in pediatric gastroenterology medicine and is compliant with all regulations.

The overall goals of the training program are to:

1. provide an appropriate training environment where fellows increase their knowledge through direct interaction with a wide variety of patients requiring GI subspecialty care,
2. train fellows to diagnose and manage gastrointestinal, pancreatic and hepatobiliary disorders in infants, children and adolescents, and to proficiently perform gastroenterologic procedures
3. foster professionalism, responsibility, respect, ethics and compassion for patients and their families,
4. teach the basis for scientific investigation, study design, and the analysis and reporting of study data resulting in a completed mentored research or scholarship project under the supervision of a scholarship oversight committee,
5. provide an environment that integrates basic science and translational teaching into clinical instruction,
6. equip fellows with the tools required for critical thinking and future success as independent and productive pediatric gastroenterologists,
7. develop expertise in all 6 core ACGME competencies, and
8. fulfill all the requirements to obtain certification in Pediatric Gastroenterology by the American Board of Pediatrics; develop the self-discipline required for life-long learning, maintenance of certification and compliance with regulations; and develop the expertise, administrative skills and insight required for career planning, adaptation, leadership and excellence in patient care.

EDUCATIONAL PROGRAM

The first year of training focuses on developing clinical judgment and procedural skills. A research project is identified and preliminary research work is also explored during the first year. In the second and third years this knowledge is consolidated in the outpatient setting. Scholarly activities are emphasized during the second and third years.

First Year

Inpatient Service

During the first year of training, each fellow will be assigned five to six months of inpatient service time. The fellow is responsible for all patients admitted to the Pediatric GI Service. The faculty attending supervises rounds and plays an active role in the case discussion, diagnostic and therapeutic plans. The gastroenterology fellow is expected to demonstrate the ability to obtain an orderly and detailed history and conduct a thorough general and gastroenterology examination. Throughout the first year, the fellow is expected to use these developing skills to organize this information and formulate a differential diagnosis and management plan. The inpatient service covers patients with a wide variety of gastrointestinal (GI), hepatobiliary, and nutritional diseases as well as pre- and post- liver and intestinal transplant care. The UCLA inpatient experience does not separate patients based on traditional gastroenterology and hepatology paradigms. Understanding the indications for and performance of diagnostic, therapeutic and screening procedures are introduced. The fellow must demonstrate ability to work with patients with critical gastroenterology issues by evaluating and following children in the neonatal ICU and the pediatric ICU as well.

Consult Service

Each first year fellow will be assigned three to four months of consultation service. The fellow will evaluate all patients as requested by any primary service at Mattel Children's Hospital UCLA. The fellow will become proficient in the evaluation of primary and secondary gastrointestinal signs and symptoms in infants and children with non-GI disease. This includes primary GI diseases in those patients with extraintestinal presentations and secondary GI diseases in patients with known non-GI diseases. The fellow will perform a complete history and examination and review any prior medical evaluation and testing. Formulations and recommendations must be reviewed with the supervising attending physician and then communicated to the referring team and placed in the patient record in a timely and respectful fashion. Patients with acute gastrointestinal or hepatobiliary disorders are evaluated in the emergency room where the fellow and team help triage patients.

Ambulatory Experience

First year fellows will spend two months in the outpatient setting. Goals include the training of fellows in the management of acute and chronic illnesses in the outpatient setting after hospital discharge or new patient consultation referrals. Fellows are expected to develop competence in the assessment, diagnosis, treatment, evaluation and follow-up management of a broad spectrum of gastrointestinal, hepatobiliary and nutritional disorders and post-transplant conditions, as outlined by the American Board of Pediatrics requirements for subspecialty certification in Gastroenterology medicine. Fellows conduct initial patient/family assessments which are directly or indirectly supervised by an attending Gastroenterologist. Fellows will develop a continuity panel of patients who they will follow during the course of their fellowship. They will be the primary GI physician for their continuity patients. In addition to Continuity Clinic, fellows rotate through Liver transplantation clinic, Intestinal transplantation/ Intestinal Rehabilitation clinic, Nutrition Support clinic, IBD clinic and general gastroenterology clinics that contain patients with a wide assortment of conditions including IBD, motility disorders, chronic diarrhea, growth failure, irritable bowel syndrome, gastroesophageal reflux disease, and functional bowel disorders

Procedures

Procedures are an integral part to the practice of the subspecialty of pediatric gastroenterology. Gastroenterology fellows receive direct experience, under supervision by a gastroenterology attending physician, with sufficient numbers of procedures, (new and follow-up inpatients and outpatients of varied ages with a variety of common and uncommon digestive disorders) performed in a methodical sequence of increasing complexity to gain competence. The fellow will become increasingly proficient in the performance of various GI invasive procedures including patient assessment, sedation, procedural techniques and post-procedure monitoring and management. The fellow will ultimately develop skills to become independently proficient in diagnostic procedures such as upper and lower endoscopy, ileoscopy, enteroscopy, liver biopsy, percutaneous endoscopic gastrostomy tube placement (PEG), and manometry. The fellow will gain experience in therapeutic procedures including esophageal dilation, sclerotherapy, banding and polypectomy.

Research Experience

Each first year fellow will be assigned four weeks of research time. Fellows should identify their area of interest and begin evaluating different research projects under the guidance of the program director during the first three-month period of fellowship. Fellows should meet with prospective mentors over the first three-month period of fellowship. A prospective mentor must be identified by February of their first year, and inquiries into the various available training grants must begin at this time. Fellows will be given a clinical duty-free period of one to two weeks to complete the grant application. A scholarship oversight committee must be established to evaluate the fellow's progress in their research activity. The scholarship oversight committee must meet once during the first year of training.

Second and Third Years

Inpatient Service

Fellows in their second year are expected to function with a greater degree of independence in all procedural and clinical areas. Their clinical judgment is expected to demonstrate a greater depth of understanding and knowledge. Specifically, greater proficiency in the following areas: the indications for and performing diagnostic, therapeutic and screening procedures, performing and reporting concise and thorough history and physical exams, interpreting clinical and diagnostic data, developing a differential diagnosis, understanding of the basic principles of solid organ transplantation, nutrition, gastrointestinal and hepatobiliary disorders. Second year fellows will spend an average of four weeks on inpatient service, provided they are on a training grant.

Fellows in their third year are expected to function at a junior attending level with a greater degree of independence in all procedural and clinical areas. Third year fellows will spend an average of two weeks on inpatient service, provided they are on a training grant.

Consult Service

The fellow is expected to show greater proficiency and independence in the evaluation of primary and secondary gastrointestinal signs and symptoms in infants and children with non-GI disease. This includes primary GI diseases in those patients with extraintestinal presentations and secondary GI diseases in patients with known non-GI diseases.

Second year fellows will spend an average of four weeks on consult service, provided they are on a training grant.

Third year fellows will spend an average of six weeks on consult service, provided they are on a training grant.

Ambulatory Experience

See above.

Procedures

Fellows will be expected to function with a greater degree of independence in all invasive procedures. Proficiency in: 1) understanding the indications for and performing diagnostic, therapeutic and screening procedures, 2) sedation techniques, 3) interpreting endoscopic findings.

Research Experience

Fellows that have obtained training grants have 75-80% protected time dedicated to their research experience, with the remaining time spent (approximately 2 months) on the ward and consult services.

Fellows in their second year are expected to continue with the development of their research activity (project) depending on their research track. Fellows in the Clinical Research Track are strongly encouraged to enroll in the Master of Science Clinical Research Program at UCLA with the goal of obtaining an advanced degree in clinical research. Fellows are expected to present their research activity to the group and their scholarship oversight committee. Fellows are expected to meet with their scholarship committee at least twice during their second year. The fellows will present a poster of their scholarly activity at the Pediatric Department's Science Day in June.

Fellows in their third year are expected to continue to gather and analyze data, organize all data collected and present their research activity (project) in oral and written form. Their research activity must result in a written "work product," i.e. peer-reviewed publication, in-depth manuscript of the completed project, thesis or dissertation with the pursuit of an advanced degree, an extramural grant application, etc. Fellows are expected to present their research activity to the group and their scholarship oversight committee. Fellows are expected to meet with their scholarship committee at least twice during their third year and obtain the signature of members of the scholarship oversight committee on the work product. The fellows will present their finished work product at the Pediatric Department's Science Day in June.

It is expected that abstracts are written and submitted to national scientific meetings for peer review during the second and third year of fellowship.

DIDACTIC EDUCATION OBJECTIVES

Fellows will participate in well-organized and regularly scheduled practical and didactic training in the body of clinical, administrative, and research knowledge and skills including procedural skills that comprise the subspecialty of gastroenterology. This will include training on the cultural, social, family, behavioral, ethical and economic aspects of Pediatrics. Formal didactic training through conferences includes:

- GI Core Curriculum Lecture Series
- GI Case Conference
- Department of Pediatrics Noon Lecture
- GI Pathology Conference
- Liver Pathology Conference
- Peds-Radiology Conference
- Department of Pediatrics Grand Rounds

- Adult/Peds GI Journal Club
- Multidisciplinary (transplant) rounds

Fellows will actively participate in planning and conducting these activities.

The gastroenterology fellows will teach medical students, pediatric residents, and other health-care personnel various aspects of gastrointestinal diseases, both informally and by preparation and conduct of regular teaching conferences for those rotating on the inpatient service.

SCHOLARLY ACTIVITIES

All Pediatric GI fellows will be expected to engage in projects in which they develop hypotheses or in projects of substantive scholarly exploration and analysis that require critical thinking. Areas in which scholarly activity may be pursued include, but are not limited to: basic, clinical, or translational biomedicine; health services; quality improvement; bioethics; education; and public policy.

Work Product of Scholarly Activity

Involvement in scholarly activities must result in the generation of a specific written "work product" as outlined by the American Board of Pediatrics (ABP). Examples include, but are not limited to:

- A peer-reviewed publication in which a fellow played a substantial role
- An in-depth manuscript describing a completed project
- A thesis or dissertation written in connection with the pursuit of an advanced degree
- An extramural grant application that has either been accepted or favorably reviewed
- A progress report for projects of exceptional complexity, such as a multi-year clinical trial

The fellow's Scholarship Oversight Committee (SOC) will be instrumental in guiding the fellow's activity towards an acceptable product. In addition to the work of the SOC, the department will provide all subspecialty fellows with the opportunity to participate in a departmental research, education, and scholarship forum to present their work product and receive feedback from department faculty.

Scholarship Oversight Committee (SOC)

The SOC in conjunction with the trainee, the mentor, and the program director will determine whether a specific activity is appropriate to meet the ABP guidelines for scholarly activities. These activities require active participation by the fellow and must be mentored. The mentor(s) will be responsible for providing the continuous ongoing feedback essential to the trainee's development.

Review of scholarly activity and the written work product will occur at the local level with each fellow having a SOC responsible for overseeing and assessing the progress of each fellow and verifying for the ABP that the requirement has been met. The SOC must consist of three or more individuals, at least one of whom is based outside the subspecialty discipline; the fellowship program director may serve as a trainee's mentor and participate in the activities of the oversight committee, but should not be a standing member. Particular emphasis will be placed on encouraging identification of committee members whose professional and research responsibilities encompass elements of the trainee's scholarly interest, but who do not necessarily have a primary appointment in the Department of Pediatrics.

This committee will:

1. Determine whether a specific activity is appropriate to meet the ABP guidelines for scholarly activity

2. Determine a course of preparation beyond the core fellowship curriculum to ensure successful completion of the project
3. Evaluate the fellow's progress as related to scholarly activity
4. Meet with the fellow early in the training period and regularly thereafter
5. Require the fellow to present/defend the project related to his/her scholarly activity
6. Advise the program director on the fellow's progress and assess whether the fellow has satisfactorily met the guidelines associated with the requirement for active participation in scholarly activities.

The fellow, in conjunction with the fellowship director or designee and research mentor, should identify the direction for the fellow's scholarly activity. At the first SOC meeting, the purpose will be to hear the general path the fellow has chosen, to help further outline the path, and determine the specific steps for the fellow to meet the outlined path. The SOC should meet again within 4-6 months of the first meeting and at least semi-annually thereafter to further update and guide the fellow on developing their scholarly path.

A written report by the chair of each trainee's SOC should be completed twice a year and forwarded to the training program director and the fellow. The program director and the head of the fellow's SOC are expected to monitor whether additional SOC meetings are necessary for fellows who need more help or may be changing their scholarly activity.

The final responsibility of the SOC is to review and approve the final scholarly "work product" of the applicant prior to submission to the ABP.

RECRUITMENT, APPOINTMENT AND ELIGIBILITY

The pediatric gastroenterology training program at Mattel Children's Hospital UCLA is ACGME accredited. All graduates of the program, should they perform satisfactorily, and upon endorsement of the Program Director are eligible to sit for the certifying examination administered by the American Board of Pediatrics in pediatric gastroenterology medicine. The length of the training program is three years.

Recruitment

Applicants must be graduates in medicine or osteopathic medicine and must have successfully completed three years of postgraduate training (residency) at an ACGME accredited residency training program.

The application is submitted through the Electronic Residency Application Service (ERAS) and the program participates in the National Resident Matching Program (NRMP) for selection of trainees. Upon review of the application by the Program Director and Gastroenterology faculty, suitable applicants are invited for an interview.

Appointment

Once the applicant has matched with our program a formal letter of appointment signed by the Program Director is mailed to the applicant. Applicants are expected to immediately apply for a California medical license. The Department of Pediatrics sends each applicant a contract, usually in the spring prior to the start of their training, which details the obligations, salaries, and benefits. The applicant is expected to sign and return this contract immediately upon receipt.

Eligibility criteria for fellowship training at UCLA

1. Applicants must be graduates of an LCME accredited medical school or Canadian accredited medical school or a graduate of a college of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA).
2. An applicant must have successfully completed three years of post graduate training (residency) at an ACGME accredited Residency Program.
3. US Citizenship, Canadian Citizenship, or permanent resident status in the U.S. is preferred. Applicants who carry J-1 visas will be considered on a case-by-case basis.
4. Applicants must obtain a California medical license prior to the start of appointment
5. If a graduate of a medical school outside the United States, applicants must have a valid certificate from the ECFMG, successfully complete three years of post graduate training (residency) at an ACGME accredited Residency Program and have a valid California medical license.
6. Applicants must register with the NRMP and provide us with their NRMP number.

DUTY HOURS

Assigned duty hours will comply with ACGME, specific RRC and University of California guidelines. The Program Director and program coordinator will monitor on-duty schedules for fellows to ensure that these assignments do not interfere with education, performance, or clinical care and judgment. Fellows will be required to record their duty hours using MedHub.

HOME CALL

Fellows take overnight call from home in rotation, and the fellow is on call approximately every sixth weekend. Responsibilities include evening/night admissions, emergency procedures, parent phone calls, and rounding with the attending on the weekend.

EVALUATION OF PERFORMANCE

Objective assessment of competence in patient care and procedural skills, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice based on the specialty-specific Milestones will be provided. Rotation-based evaluations, 360-degree evaluations, and peer evaluations are part of the evaluation process.

Subspecialty In-Training Examination (SITE) – On an annual basis, each fellow is required to take the subspecialty in-training examination administered by the American Board of Pediatrics. This examination is used to assess subspecialty knowledge and training progress.

BENEFITS

Salary scale for 2016-17

PGY4	\$60,211
PGY5	\$62,676
PGY6	\$65,005

Vacation/Leave

Fellows receive a total of 4 weeks (20 work days) of paid vacation time per year plus five days off during the holidays in December, which shall be scheduled with mutual agreement with the Program Director, Fellowship Coordinator or a designated Faculty member.

All other leaves, including medical, sick, maternity/paternity, or family leave may be taken according to written policy as noted on the UCLA GME website.

<http://medschool.ucla.edu/gme-policies-procedures>

Liability Insurance

The Medical Center shall include fellows under the University's self-insurance program while acting in the performance of his/her duties or in the course and scope of his/her assignment.

Health Insurance

Fellows and eligible members of his/her immediate family are provided with health, dental, life, and vision care insurance. In addition, fellows are provided life and disability insurance.

Voluntary Retirement Savings Account

UC offers its employees a voluntary pre-tax retirement savings account (403(b)). Employees who want to participate in the 403(b) plan designate a portion of their gross salary to be contributed on a pretax basis.

Parking

The University provides parking access and sets monthly parking fees. If parking is purchased, pre-tax deductions may be made from the monthly paychecks.

UCLA Housing for Graduate Students and Students with Families

The UCLA Housing Office staff is available to answer questions and assist with housing options, meal plans, budget counseling and payment information. UCLA-owned University Apartments offer independence, as well as access to a community of fellow students. If privately-owned housing is preferred, the UCLA Community Housing Office has resources to locate housing in neighboring communities. For more information: <http://housing.ucla.edu>

UCLA Medical Center will provide the following:

Meals – Meals will be provided through the Resident's Meal Card Program, in compliance with ACGME requirements. Fellows who are scheduled to work in the UCLA Healthcare System in direct patient care activities that are nine (9) or more continuous hours per day will receive meal credit. Time spent in non-clinical settings, i.e. research laboratories, library, etc, does not count towards meal credits.

ID Badges/BruinCard – The BruinCard is the Passport to Life at UCLA. It serves as the official University identification card/badge, permits access to hospital facilities, special events and can be used to purchase goods and services throughout the University, Medical Center and Health System. Meal credits will be deposited to the BruinCard. Badges must be worn for clear identification.

Uniforms – At least one long white coat will be issued to each fellow. A one-for-one exchange program is provided.

Communications – Pagers will be supplied. The Medical Center will provide email. Fellows are provided access to the Internet in all areas of the Medical Center and Clinics and from home, at no cost, through UCLA Bruin On Line.

Libraries – All fellows have full access to the Biomedical and California Digital Library at no cost. Computer facilities are available, including word processing, spreadsheets, databases and presentation software.

House Staff Sleep Quarters and Resident Lounge – House staff sleep quarters are provided and may be used for overnight calls, strategic napping and napping prior to driving home when there are concerns about fatigue. A lounge with telephones, computers, TV is located near the house staff sleep quarters. Food service is available 24 hours per day in the resident lounge.

Educational Expense (Book) Allowance

This allowance must be used for purchase of medical textbooks or educational material; the allowance is \$400.00 per fellow during their post-graduate training.

Travel Expense Allowance

With the approval of the Department Chairman, the Pediatric Gastroenterology Training Program will support Second and Third Year Fellows to attend one (1) national conference per year. The program will allow up to \$1,000.00 per academic year in travel funds per fellow.

The Janet and Ray Scherr Fellowship Loan Repayment Endowment Program

The Scherr Fellowship Loan Repayment program provides loan assistance for fellows to help repay medical student debt and to encourage fellows to pursue a career in the field of pediatric academic medicine. The candidate must exhibit documented loans and is selected based on merit and need by a committee of faculty members. All applicants are evaluated on a competitive basis depending on their potential for an academic career post-fellowship.

Loan Amount and Repayment

- The loan amount is a maximum of \$10,000 per fellow per year of fellowship.
- The loan is interest free while not in repayment.
- For every year after graduation that the individual remains on the faculty at Mattel Children's Hospital UCLA or elsewhere in a full-time academic pediatric position, a full year's repayment is forgiven. (For example, if the individual remains on as faculty for 2 years in a full-time academic pediatric position, then 2 years would be forgiven, etc.).
- The loan amount that is forgiven is subject to federal and state taxes.
- If the trainee does not stay in academic medicine, the entire amount must be repaid within three years of the date the amount financed becomes due and payable (the due date and payable date is one year after completion of the fellowship or immediately if the fellow withdraws from the program).

PROGRAM FACULTY, FELLOWS & ADMINISTRATIVE STAFF

Faculty

Sue V. McDiarmid, MD
Professor of Pediatrics and Surgery
Chief, Division of Pediatric Gastroenterology,
Hepatology and Nutrition
Program Director, Pediatric Gastroenterology Training Program

Elizabeth Marcus, M.D.
Clinical Instructor of Pediatrics

Martin G. Martin, M.D.
Professor of Pediatrics

Elaheh (Eli) Vahabnezhad, M.D.
Associate Physician

Jorge Vargas, M.D.
Professor of Pediatrics

Robert Venick, M.D.
Associate Clinical Professor of Pediatrics

Laura Wozniak, M.D.
Assistant Clinical Professor of Pediatrics

Joanna Yeh, M.D.
Clinical Instructor of Pediatrics

David Ziring, M.D.
Associate Professor of Pediatrics

Current Fellows

Neetu Bali, M.D. (PGY-6)
Emily Whang, M.D. (PGY-6)
Marjorie Guerra, M.D. (PGY-5)
Amanda Pope, M.D. (PGY-5)
Janice Bitong, M.D. (PGY-4)
Shweta Namjoshi, M.D. (PGY-4)

Program Coordinator, Pediatric Gastroenterology Training Program

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