

# OB/GYN Residency Newsletter

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Volume 7 Issue 1

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*"I look forward to working alongside our talented faculty and residents to achieve these objectives and further elevate our program's standard of excellence"*

## A Word from the PD:

It is with great pleasure that I welcome you to the latest edition of our OB/GYN Residency newsletter. As we embark on a new academic year, I'm happy to announce the successful recruitment of our second class of five exceptional interns. Our entire cohort of residents has hit the ground running, embracing their new roles with enthusiasm and dedication.

Before we look ahead, I'd like to take a moment to celebrate the remarkable achievements of the 2023-2024 academic year:

- Our graduates surpassed all ACGME minimum procedure requirements, demonstrating their clinical proficiency.
- We had three residents presenting research studies at national conferences and five research papers accepted for publication in peer-reviewed journals.
- We had a 100% pass rate on both the ABOG Qualifying and Certifying examinations.
- Drs. Caroline MacGillivray and Karissa Rajagopal were honored with the Golden Apple Award for their outstanding teaching, as voted by the CMSRU Class of 2024.
- Dr. Alexa Corso was inducted into the Gold Humanism Honor Society by the CMSRU Class of 2024, recognizing her exemplary compassionate patient care.

Building on these successes, we've set goals for 2024-2025:

1. Continue to implement our Diversity Plan to foster an inclusive learning environment.
2. Explore the implementation of Centering Pregnancy: prenatal group visit model at JFWCC to enhance prenatal care for our Spanish speaking patients.
3. Collaborate with surgical subspecialties to provide residents access to the robotic training console.
4. Operationalize our Communication Curriculum for PGY-3 residents.
5. Residents to receive practice data from JFWCC, including session utilization, no-show rates, and patient volumes.
6. Refine our post-rotation evaluation process to provide more meaningful feedback to residents.

These goals reflect our commitment to continuous improvement and innovation in medical education. I look forward to working alongside our talented faculty and residents to achieve these objectives and further elevate our program's standard of excellence.

### Residents -

- Please complete your post rotation TrueLearn quizzes.
- Remember to log your duty hours daily.
- Please keep your case logs up to date on a weekly basis.
- Schedule a monthly meeting with your mentor and complete the mentoring form.

### Faculty -

- Please complete the monthly post rotation evaluations in New Innovations within 2 weeks of receiving them.
- Continue to complete myTIPreports.
- Continue to meet with your mentees.

## Diversity, Equity and Inclusion

### Department of OBGYN Diversity Plan

1. Continue to improve the education for faculty and residents regarding racial disparities in healthcare (Grand Rounds, Journal Club).
2. Continue our community outreach with fundraising for local women's shelters, Cooper Foundation sponsored events, and education for the youth involved in the Lifting Up Camden Youth (LUCY) Outreach Program.
3. Continue to implement our Visiting Elective Scholars Program for 4<sup>th</sup> year medical students who self-identify as URM and perform a more holistic review of applications to increase diversity in our residency program.
4. Continue to promote Quality Improvement projects that identify cultural barriers to care and test these interventions to address these barriers.



CHAMPS (Communities and Hospitals Advancing Maternity Practices) seeks to improve maternal and child health outcomes and decrease racial inequities in breastfeeding rates in the US.

- CHAMPS entered a 3-year agreement with the CDC to enroll 100 hospitals nationally with the goal of reducing racial disparities in breastfeeding rates and maternal child health practices



Next Step - Create a Steps Team to guide the initiative

Thanks to Bonnie Mannino for taking the lead on the application and getting us accepted!

### Opportunity - Diversity, Equity and Inclusion & Belonging

**Role Title:** Diversity Champion (planned 0.1 FTE)

**Role Overview:**

- The Diversity Champion is an individual designated to actively promote a diverse, supportive and inclusive environment for patients, employees and learners in alignment with CUHC and CMSRU policies and procedures. The Diversity Champion will help to develop and put into practice departmental diversity, equity and inclusion policies by fostering good relationships within the team, listening to staff and actively creating opportunities for team members to convey what they need to feel included and valued. This process will include creating a database to define current state and track changes over time.

- If interested in this position contact Dr. Hewlett at [hewlett@rowan.edu](mailto:hewlett@rowan.edu).

## Research Division News Congratulations!

Eggers E, Crouss T, Lipetskaia L, DiSanto M. Urinary Sphingosine-1-Phosphate as a Biomarker for Bladder Pain Syndrome. *Urogynecology (Phila)*. 2024;30(3):374-80. doi: 10.1097/spv.0000000000001473. PubMed PMID: 38484256.

Shah S, Eggers E, Hunter K, Lipetskaia L. Quality of Pelvic Floor Therapy Videos on YouTube: Does Popularity Predict Reliability? *Urogynecology (Phila)*. 2024;30(3):233-8. Epub 20240123. doi: 10.1097/spv.0000000000001456. PubMed PMID: 38484236.

Stemmer SM, Gomes C, Cardonick EH. A Case of Painful Growing Abdominal Wall Mass during Pregnancy Requiring Resection in the Second Trimester. *Case Rep Obstet Gynecol*. 2024;2024:5881260. Epub 20240108. doi: 10.1155/2024/5881260. PubMed PMID: 38229587; PMCID: PMC10789513.

Ganetsky V, Yates B, Salzman M, Heil J, Jones I, Hunter K, Perry R, Baston K. A retrospective cohort study of disparities in urine drug testing during the perinatal period in an urban, academic medical center. *Maternal and Child Health Journal*. <https://doi.org/10.1007/s10995-024-03940-4>. Accepted: 14 May 2024.

Eggers E, Crouss T, Beausang J, Smith D, Sepctor S, Saracco B, Adams A, Dickinson T, Lipetskaia L. Long-term Outcomes of Sacral Nerve Stimulation on the Treatment of Fecal Incontinence: A Systematic Review. *Neuromodulation*. 2024. Epub 20240817. doi: 10.1016/j.neurom.2024.06.504. PubMed PMID: 39152989.

Helai H, Orejuela F, Rood K, Turrentine M, Casey B, Khandelwal M, Dajao R, Azad S, Rosen T, Hoffman M, Wang E, Hart E, Sheen J, Grisales T, Gibson K, Torbenson V, Williams S, Evantsh E, Dietz H, Wapner R. Effect of an Intrapartum Pelvic Dilator Device on Levator Ani Muscle Avulsion during Primiparous Vaginal Delivery: A Pilot Randomized Controlled Trial. *International Urogynecology Journal*. <https://doi.org/10.1007/s00192-024-05881-6>.

Dr. Mama served as an international invited Lecturer and Panelist on PELVIC NEUROANATOMY at the 1st Annual Conference of Female Pelvic Pain Association & SAFUG (South Asian Federation of Urogynecology) & Urogynecology Committee AOGD (Association of Obstetricians and Gynecologists of Delhi)



**Understanding the Current State of Socially Determinant Health Disparities in Obstetric and Gynecology Morbidity & Mortality Conferences**  
Hannah Diast, BS<sup>1</sup>, Amelle Williams, MD<sup>2</sup>, Natali Franzblau, MD<sup>1,3</sup>  
<sup>1</sup>Cooper Medical School of Rowan University, Camden, NJ  
<sup>2</sup>Department of Obstetrics and Gynecology, NJGJ, Cooper University Hospital, Camden, NJ  
<sup>3</sup>Department of Obstetrics and Gynecology, Cooper University Healthcare, Camden, NJ

**Introduction & Background**

- Morbidity and Mortality Conference (MMC) is a well-established and important component of resident education, instilled by the ACOG or SBC. Instilled as a means of accelerating the care competence of trainees, the aims of these conferences focused on medical knowledge and adverse outcomes in the setting of quality improvement (QI), facilities, and risk management.
- In the context of Obstetrics and Gynecology (OB/GYN), a reflection on both the medical and surgical management which play into health care in the field lends a great opportunity to advance clinical management and system practices.
- MMCs have evolved away from "blame and shame" into learning opportunities, directing attention to communication and system problems: between trainees, providers, and patients.
- Within the current model of OB/GYN MMC, a Fishbone diagram is utilized, highlighting systemic processes that bear influence on patient outcomes and require transparency in discussion to work towards their improvement.
- The Fishbone diagram focuses six main categories from which data is gathered as it applies towards outcomes on: assigned: Environment, Equipment, Information, People, Procedures/Policies, and Resources. As a result, there is an implicit categorization for factors that are individual to the patient who enters the care and address the outcome.
- As such, the social determinants of health (SDOH), which have profound effects on health care practices and outcomes, should be included in the address of quality improvement.

**Objectives**

- Create a screening methodology for assessing the representation of SDOH in current conferences and presentations, as compared with the Electronic Medical Record (EMR).
- Develop a standardized Inventory, Equity, and Inclusion (DEI) Fishbone diagram for implementation to MMC.
- Identify the degree of representation of SDOH identifiers in the presentation and discussion of cases in MMC.

**Methods**

- The DEI Fishbone Diagram, and presentations during as far back as 2020 were collected for screening with a developed list of questions addressing: Equity, Inclusion, Financial, Education, Language, Religion/Race/Culture/Orientation, Lifestyle/Behavior, Gender/Sexual Orientation, and Housing.
- Resident education on the DEI Fishbone template as a modified framework for implementation in MMCs was presented.
- MMC material was reviewed utilizing the same screening methodology following the implementation of the DEI Fishbone.

**DEI Fishbone**

**Results**

**Discussion & Conclusion**

- MMCs function with the purpose of medical education and aims at quality improvement (QI), without consideration of the patient factors which play a known role in system practices and patient outcomes. MMCs possess a critical component of discussion which, at times, be pertinent to addressing gaps in the practices which contribute to adverse outcomes.
- In our study, we found that an average of 1.2 patient SDOH identifiers were included in Fishbone diagrams, as compared with the 7.133 found within the EMR. Importantly, though, an average of 2.132 SDOH identifiers were found to be included in the Fishbone and Presentation material, suggesting that SDOH were considered in the case presentation, but were not thought to be an attributable factor to the outcome of the case.
- There is criticism of MMCs for not being inclusive of cases chosen, people present at the discussion and developing action plans when necessary. Adding this additional dimension to the review of cases may help to more fully analyze systemic issues that contribute to adverse outcomes.
- Medicine has a long-standing history of institutionalized systemic oppression of which health disparities persist to the present day. As a field, medicine has moved towards acknowledgement of the role these factors play in the statistics which quantify health disparities.
- Creating a DEI template for MMC is an initial step towards offering space for discussion and sparking change to ameliorate these disparities and address adverse outcomes which can be, even if only in some part, attributed to SDOH factors.
- Our QI study was limited by:
  - Number of MMCs included in the data analysis
  - Implementation of the DEI Fishbone was not disseminated
  - Analysis was confined to presentations 11 through 15.
- Our study highlights the importance of in-a-studio further investigation on the presence and integration of SDOH in cases presented at MMCs. It urges integration of variable into medical education.

**References**

Dr. Franzblau and Dr. A. Williams presented a poster at NJOGS



## Research Division News (cont)

### Current research studies:

EASE Study: A randomized, controlled study to EvALuate the Safety and Effectiveness of the Materna Prep Device to pre-stretch (i.e., dilate) the vaginal canal and pelvic floor tissues in preparation for vaginal delivery

Principal Investigator: Dr. Rori Dajao  
Co-Investigators: Drs. Lipetskaia, Albuedefe, Dickinson, Homer, Reid-Herrera, and Soto! (anyone else interested?)

#### Updates:

Phase 2 Published in the August issue of the International Urogynecology Journal!

Looking for anyone willing to train as a Co-I. Attending or Resident. Requires Citi, in-person device placement training, and didactics

Looking for additional sonographer, training provided. Requires Training on 3 practice patients with study sonographer

Newly offering \$100 to resident fund or on-call randomizations

#### Inclusion:

- Looking to consent nulliparous patients over the age of 18
- Randomizing and device placement at 6-8 cm dilation

ORIGINAL ARTICLE

### Effect of an Intrapartum Pelvic Dilator Device on Levator Ani Muscle Avulsion During Primiparous Vaginal Delivery: A Pilot Randomized Controlled Trial

Helal Hesham<sup>1</sup>, Francisco Drejuela<sup>2</sup>, Kara M. Rood<sup>3</sup>, Mark Turrentine<sup>4</sup>, Brian Casey<sup>5</sup>, Meena Khandelwal<sup>6</sup>, Rori Dajao<sup>7</sup>, Sarah Azad<sup>8</sup>, Todd Rosen<sup>9</sup>, Matthew K. Hoffman<sup>8</sup>, Eileen Y. Wang<sup>9</sup>, Laura Hart<sup>10</sup>, Jean-Ju Sheen<sup>11</sup>, Tamara Grijales<sup>11</sup>, Kelly S. Gibson<sup>12</sup>, Vanessa Torbenson<sup>13</sup>, Shauna F. Williams<sup>14</sup>, Edward Evantash<sup>15</sup>, Hans P. Dietz<sup>16</sup>, Ronald J. Wapner<sup>1</sup>

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#### Abstract

**Introduction and Hypothesis** The objective was to evaluate the safety and effectiveness of an intrapartum electromechanical pelvic floor dilator designed to reduce the risk of levator ani muscle (LAM) avulsion during vaginal delivery.

**Methods** A multicenter, randomized controlled trial enrolled nulliparous participants planning vaginal delivery. During the first stage of labor, participants were randomized to receive the intravaginal device or standard-of-care labor management. The primary effectiveness endpoint was the presence of full LAM avulsion on transperineal pelvic floor ultrasound at 3 months. Three urogynecologists performed blinded interpretation of ultrasound images. The primary safety endpoint was adverse events (AEs) through 3 months.

**Results** A total of 214 women were randomized to Device (n = 113) or Control (n = 101) arms. Of 113 Device assignees, 82 had a device placed, of whom 68 delivered vaginally. Of 101 Control participants, 85 delivered vaginally. At 3 months, 110 participants, 46 Device subjects who received full device treatment, and 64 Controls underwent ultrasound for the per-protocol analysis. No full LAM avulsions (0.0%) occurred in the Device group versus 7 out of 64 (10.9%) in the Control group (p = 0.040; two-tailed Fisher's test). A single maternal serious AE (laceration) was device related; no neonatal serious AEs were device related.

**Conclusions** The pelvic floor dilator device significantly reduced the incidence of complete LAM avulsion in nulliparous individuals undergoing first vaginal childbirth. The dilator demonstrated an acceptable safety profile and was well received by recipients. Use of the intrapartum electromechanical pelvic floor dilator in laboring nulliparous individuals may reduce the rate of LAM avulsion, an injury associated with serious sequelae including pelvic organ prolapse.

**Keywords** Intrapartum pelvic dilation · Levator ani avulsion · Pelvic floor muscle injury · Primiparous vaginal delivery

## Resident/Fellow Research Presentation Dinner

The Resident/Fellow Research Day was held on June 10<sup>th</sup>. Third-year residents and fellows present to the faculty, residents, medical students and staff. The research presentations are judged, and awards are given to the resident and fellow with the most outstanding research paper.

Congratulations to the award winners for most outstanding research papers!!

Fellow: Rebeca Kelly, MD for: *“The Effects of Natural Epigenetic Therapies in 3-D Ovarian Cancer & Patient-Derived Tumor Explants: New Avenues in Regulating the Cancer Secretome”*  
Faculty Mentor: Lauren Krill, MD

Resident: Anna White, DO for: *“Social Work and Behavioral Medicine Consult Policy for Pregnant and Postpartum Patients”*  
Faculty Mentor: Lori Adriance, MD



## Research Division News (cont)

### Current research studies:

Fetal Loss - LosSEQ  
Perinatal Research Consortium NIH Grant through Harvard University

Principal Investigator: Dr. Robin Perry  
Co-Investigators: Please reach out if interested

#### Updates:

- 21 enrolled in Phase 3
- Expecting results from first batch of sequencing very soon

#### Reminders:

- Clinical provider to ask the patient if she is willing to be approached about the study.
- Please text or call Dr. Perry or Alex Santangelo.
- Please remember to collect a 1 to 2 cm section of the umbilical cord on all stillbirths, stored in fridge with saline.

#### Inclusion

- In utero fetal demise, >14 weeks gestation and occurring prior to the onset of labor
- Parents are 18 years or older
- No confirmed genetic cause

A prospective, natural history study to assess the occurrence of HPA-1a alloimmunization in women identified at higher risk for fetal and neonatal alloimmune thrombocytopenia (FNAIT)

Principle Investigator: Dr. Robin Perry



Primary Objective: To inform the frequency of women at higher FNAIT risk among pregnant women of different racial and ethnic characteristics who present for pre-natal care.

#### Inclusion:

- Any pregnant patient between 10-14 weeks gestation, over 18 years of age, and no prior history of FNAIT.

#### Updates:

- 293 patients enrolled so far at Cooper!
- Capped at 75/quarter, starting in Washington Township (Ankur) and Voorhees (Audrey, new RA)
- Anticipate enrollment will continue to mid-2026

Collaborative study with CMSRU Center for Humanism and ObGyn department on experiences working with medical students

- Britt Dahlberg PhD reaching out to Attendings, residents, nurses, and medical students for participation in structured interviews.

## Research Division News (cont)

### QI/PI Projects 2023-2024

#### PGY-4:

Residents: Hailey Hutcheson, MD, Kyle Le, MD, Blaire Nasstrom, DO, Danielle Schenker, MD

Faculty Mentor: Dr. Malik

Topic: "Strategies to Increasing Postpartum Follow-up Attendance."

#### PGY-2:

Residents: Alexa Corso, DO, Emily Hahm, MD, Alyssa Lasure Black, MD, Karissa Rajagopal, DO

Faculty Mentor: Dr. Malik

Topic: "Postpartum Contraception Counseling."

#### PGY-1:

Residents: Bianca Aibeudefe, MD, T Dickinson, MD, Olivia Homer, MD, Savina Reid-Herrera, MD, Edgar Soto, MD

Faculty Mentor: Dr. Dajao

Topic: "Meds to Beds: A Pilot Study."

### Research Division: General Updates:

*Welcome to our recently hired new Research Assistants, Vivian Ayo and Audrey Ross!*



### Congratulations, Dr. Mitchell-Williams!

*Dr. Mitchell-Williams has accepted the role of Medical Director OB/GYN Research*



### Congratulations, Alex Santangelo!

*Alex Santangelo has been promoted to the position of Manager of OB/GYN Clinical Research*

### Best Wishes Dr. Khandelwal!

*Dr. Khandelwal has accepted a position at Jefferson Abington Hospital as Medical Director of Maternal Fetal Medicine. She will be maintaining her faculty appointment at CMSRU.*

*We wish Dr. Khandelwal the best as she begins this new chapter.*



## Spotlight on Faculty Member, Dr. Joseph LaMotta

Where did you go to medical school and residency? Medical School: UMDNJ-Robert Wood Johnson Medical School. Residency: Cooper University Hospital

What books are you currently reading? Currently reading: *The Little Liars* (Mitch Albom)

What is your favorite restaurant? *Tre Famiglia* (Haddonfield), *The Saloon* (Philadelphia), *Knife and Fork* (Atlantic City), *Steve and Cookies* (Margate), *Dock's Oyster House* (Atlantic City)

What do you like to do in your spare time? *Learning to play Blues Harmonica, Attending Concerts with my two Daughters, Making the perfect Marinara and Arrabiata Sauce, In search of the perfect Hoagie, Weekends in Margate, N.J., Raising "Milo" the Mini Long Haired Dachshund*

What do you like most about medicine? *In medicine you are empowered with the privilege of a profession like no other. There are certainly other professions that can be likened to medicine regarding being entrusted with the wellbeing and/or safety of a person or a group of people. But there is no other profession for which the outcome of your care and performance is directly dependent upon being endowed with the permission to physically examine and evaluate another person. In medicine the ultimate 'invasions' of privacy (physical and psychosocial) coupled with the recruitment of trust on the part of the patient are at the core of your responsibility toward literally improving or changing someone's day to day reality. It is very humbling and satisfying to be able to contribute toward making a difference in the day, the week, the month or the year(s) in the life of another person. And the irony is that this result is often accomplished, at least in part, just by conveying your concern and consideration before (or even despite) a physical resolution. Hence, the segue into one of the main reasons that I had chosen Ob/Gyn...it is the quintessential specialty with regard to providing life long, life-stages based continuity of care. One of my foundational tenets of patient care is that I would rather that a patient not believe me than not trust me.*

What do you like least about medicine? *I'm not sure that it is so much what I like the least as much as it that which has/have had a paradoxical impact upon the practice of medicine. For instance, electronic medical records. While they can be very important for algorithmically standardizing medicine and implementing "best practice" paradigms, it does impart a reflexivity, a dependency, a clinical repetition, a complacency and a consequent 'expectation' regarding management and outcome. One sequela of which has been some diminishment in the 'art' of medicine by creating clinical 'guard rails'. Granted, some of the more acute/resuscitative based clinical situations warrant such a linear management construct, but I feel as though the practice of medicine has become progressively more compartmentalized and, in some clinical scenarios, even "binary". Additionally, while EMR and best practice guidelines have been developed, and have become relied upon, to mitigate lapses in communication and gaps/oversights in clinical 'judgement', they have notably supplanted the original "EBM", or what I refer to as "experienced based medicine". I am not suggesting that best practice guidelines should be ignored, but I still believe that context matters, and that clinical experience/judgement should be complementary to practice guidelines when not to the predictable detriment of the patient. Clinical 'guard rails' should be made of rubber, not steel. The practice and delivery of medicine has in many respects become 'necessarily' institutionalized and compartmentalized, but which has also nearly eliminated the logistical and clinical individualization of the practice of medicine. Lastly, while the advent of EMR, practice guidelines and the institutionalization/compartmentalization of medicine have 'standardized' the delivery of medical care for both physicians and patients alike, they have not necessarily 'streamlined' it; and hence a paradoxical decrease in physician satisfaction as the result of the transition to a more "menu" based, redundant and less autonomous paradigm.*

A few words to the residents: *Suffice it to say that you will leave Cooper confident, reassured and knowing all that you need to know to be an extremely competent Obstetrician and/or Gynecologic Surgeon and to practice in the clinical environment or subspecialty of your choosing. At the risk of sounding, well...like me, always remember to be pragmatic and clinically curious. Do not abandon the age-old construct, fundamental skills and the art of clinical diagnosis; it has and always will begin with the HPI and end with labs and imaging, not the other way around. I was once told that "the more that you see the more you'll know, and the more that you know the more you'll see". Try not to be a specialist who happens to be a clinician, be a clinician who happens to be a specialist. If not already, you will soon realize just how privileged that you are to be doing/ to have done your residency at Cooper.*

*My final thought...due to the inherent investments of time, logistics and conscience demanded by medicine, it is extremely easy for your career to define you. Try not to let it unless that is truly your intention. Cooper Ob/Gyn Residents are an exceptionally remarkable group of people who just happened to have chosen medicine as their career and that we, as attendings, are equally as privileged to be learning from you. Thank you for that.*



Joseph LaMotta, MD, FACOG  
Obstetrician/Gynecologist

Assistant Professor of Clinical  
Obstetrics & Gynecology



## Welcome New Faculty!

Felipe Mercado, MD



Felipe Mercado, MD  
Obstetrics & Gynecology  
at CAMcare



Where did you complete your residency?  
*I completed my residency at Lincoln Medical Center in NYC.*

What do you look forward to the most about teaching residents?  
*I look forward to sharing my interest in gynecologic surgery.*

Do you have a favorite restaurant?  
*In Philly it would be Double Knot.*

What do you like to do when you're not working?  
*Food is a big part of my life. I am always trying new places to eat. I'm also a little bit of an audiophile. I like listening to music and visiting local record stores.*



Jewel N. Amui-Bellon, MD, FACOG  
Ambulatory ObGyn



(Anna) Marie O'Neill, MD  
Maternal Fetal Medicine



## Welcome New Faculty (cont)

**Nina Shearer, MD**



Nina Shearer, MD  
Generalist ObGyn



Where did you complete your residency?

*I completed my residency at Aultman Hospital/NEOMED, Canton, OH*

What do you look forward to the most about teaching residents?  
*I love watching residents grow surgically. I like the collaborative environment of giving and receiving feedback. I also look forward to learning from the residents.*

What do you like to do when you're not working?

*When I'm not working, my wife and I love finding a new restaurant.*



\*\*\*\*\*

Where did you complete your residency?

*I completed my residency at NYU*

What do you look forward to the most about teaching residents?

*I'm looking forward to surgical teaching in the OR!*

What do you like to do when you're not working?

*I like to try new restaurants, spend time at the beach, And run/bike.*



**Micaela Cyr, MD**



Micaela Cyr, MD  
Generalist ObGyn

\*\*\*\*\*

**Oumou Keita, MD**



Oumou Keita, MD  
Generalist ObGyn



Where did you complete your residency?

*I completed my residency at Boston Medical Center in MA.*

What do you look forward to the most about teaching residents?

*I look forward to mentoring, seeing growth and progress, and gaining fresh perspectives and insights from the residents.*

What do you like to do when you're not working?

*Outside of work I enjoy traveling, spending time outdoors, caring for my plants, and experiencing other cultures through food.*

## Spotlight on Administrative Chiefs

### Dr. Lexie Quiñonez



**Where did you relocate from?** I was born and raised in Oklahoma, but I moved to the East Coast during medical school while attending VCOM in the upstate of South Carolina.

**What do you enjoy most about Cooper?** The people. The patients. The friends who have become my home away from home! Oh, and the amazing theme parties we throw any chance we get.

**Do you have a favorite restaurant?** So many favorites in my Fishtown neighborhood: Middle Child Clubhouse, Suraya, Laser Wolf!!

**What do you like to do when you are not working?** All the residents know to count me in when making plans, I will always come! I love outdoor patios with yummy food and a cocktail, long walks around the neighborhood, reading books on my pink couch, or traveling to see my fiancé.

**Now that you are in your last year of residency, what advice do you have for your junior residents?** Approach each day with a positive attitude! Be inquisitive, ask all the questions. Take on all the learning opportunities that come your way - that is what residency is for. Recharge when you need to. Be patient with yourself and with others.



### Dr. Anna White

**Where did you relocate from?** I grew up in Buffalo, NY but moved to Philadelphia from Pittsburgh, PA.

**What do you enjoy most about Cooper?** The people! That's why I came to Cooper after I did my sub-I here and certainly one of the things I will miss most. I also love our training in Family Planning and Robotic Surgery, now two of my favorite things.

**Do you have a favorite restaurant?** I have many, I'd have to say Suraya or Osteria.

**What do you like to do when you are not working?** Go to Longwood gardens or read a good book.

**Now that you are in your last year of residency, what advice do you have for your junior residents?** Don't forget about life outside of residency and find something that you enjoy outside of work and prioritize it in your life. This will help remind you to take time for your wellness while spending so many hours taking care of others.



Leona Chang, DO  
Gynecologic Oncologist at Virtua Health  
Cooper OBGYN Resident 2013-2017



## Spotlight on Alumna, Dr. Leona Chang

What year did you finish residency? *I finished my residency in 2017.*

What year did you finish fellowship? *I finished my fellowship in Gynecologic Oncology at Cooper in 2020.*

What first inspired me to go into OBGYN?

*I was drawn to the unique field of OBGYN when I saw how I could make an impact on women's lives both in the office setting and operating room. It is such a privilege for someone to entrust their life in your hands during some of their most vulnerable times.*

What advice would you give to OBGYN residents?

*Residency can be such a difficult time in your life but try to maximize every learning opportunity. The people you meet help shape the attending you will become. The friendships you build with your co-residents are bonding and lifelong. We are in such a unique field to have mentors and colleagues you can call upon at any time in your life, so cherish those relationships.*

How do you spend your free time/hobbies or interests?

*I have always enjoyed being active and exercising which has been hard after having my daughter. I try to fit in a Peloton ride or go to HIIT workouts with my friend who I worked with in the ORs at Cooper! This summer I've enjoyed going to the Jersey Shore with my family and we also like traveling around the world.*

Congratulations to Kyle Le, MD, Class of 2024  
for matching in REI!



Welcome to our 2025 REI Fellow!

Kyle is an exceptional candidate! He will substantially add to the fellows we recruit year after year and will contribute to the continued success of our fellowship program. We would like to thank everyone who participated in the interviews.

Drs. Banks & Harris and Kelly Sylvester

— Congratulations —

Reproductive Endocrinology & Infertility 2025 – 2028 Fellow



Kyle Le, MD

[le-kyle@cooperhealth.edu](mailto:le-kyle@cooperhealth.edu)

Medical School: Sidney Kimmel Medical College at Thomas Jefferson University, Philadelphia, Pennsylvania

Residency: Cooper University Health Care, Camden, NJ



## Congratulations!

The Department of Obstetrics & Gynecology is proud to announce our  
Three Golden Apple Award Recipients



Amanda Malik, MD



Caroline MacGillivray, MD



Karissa Rajagopul, DO



Alexa Corso, DO

The Arnold P. Gold  
Foundation Humanism  
in Medicine Award has been  
awarded to  
Alexa Corso, DO

The OB/GYN 2024 Graduates of the Cooper Physician Leadership Program



Michelle Iavicoli, MD



Sook Kim, MD

OB/GYN Team Player of the Quarter  
Voted by their peers



Anna White, DO

3rd Quarter

4th Quarter



Lexie Quinonez, DO

SIM Days focusing on: Total Laparoscopic Hysterectomy Simulation with Dr. Malik, Dr. Hennebery and Diego Sanchez, 3rd and 4th degree lacerations repairs with Dr. Mama and the Urogyn fellows and THV Workshop with Dr. Pancheshnikov and the Urogyn Fellows



**Philadelphia Regional Educational Consortium of OBGYN (PRECOG),** a boot camp for new interns, was held on June 28, 2024, at the Virtua Simulation Center. 46 interns and 19 faculty from the OB/GYN programs from the surrounding region, including our own faculty, Drs. Hewlett, Adriance, Malik and Kim participated. The interns learned knot tying, how to perform cesarean deliveries, perineal repairs, laparoscopy, hysteroscopy, cervical ripening techniques and IUD placement.

Special thanks to Sue McFadden and the team of program administrators.



**RESIDENT RETREAT**  
**May 31, 2024**  
**Relax, Restore, Rejuvenate!**



On behalf of the residents, we wanted to say thank you for covering us and sponsoring our Resident Retreat on May 31st. We had perfect weather and went on a morning hike, followed by lunch and candle making. We appreciate you all!



Day team coverage provided by Drs. Malik, Dajao, Sweeney, Adriance, Ross, Kim and Hennebery.

Evening shift was covered by Drs. Malik, Dajao and Mercado (not pictured).

## INTRODUCING OUR NEW INTERNS



## Welcome Class of 2028!

### Takiwaa Awuah

Takiwaa earned her MD from Eastern Virginia Medical School. She likes travelling, hiking, trying new restaurants, watching movies, spending time with family & friends and going to the gym.



### Katie Blankmeyer

Katie earned her MD from Drexel University School of Medicine.

She enjoys crochet, yoga, crossword puzzles, theater, outdoor concerts, cooking and trying new foods!

### Sarah McGuire Calilung

Sarah's MD was earned at Robert Wood Johnson Medical School at Rutgers. Her favorite things are spending time with her husband and dog, lifting weights, trying new foods, making coffee and sailing.

### Katie O'Connor

Katie's MD was earned at Cooper Medical School of Rowan University. Cooking, hiking, traveling, taking care of her plants and exploring Philly neighborhoods are her favorite things to do.

### Simi Tani-Olegbemi

Simi earned her MD at Lewis Katz School of Medicine at Temple University. She enjoys traveling, trying new restaurants, binging Netflix, reality TV and word puzzles.

### Urogynecology and Reconstructive Pelvic Surgery



Emilee Khair, MD  
Residency: Ascension St. John  
Detroit, MI

### Gynecologic Oncology



Hannah Hong, DO, MPH  
Residency: Orlando Health  
Orlando, FL

Welcome Fellows!

**Welcome 2024-2025 Academic Year!**

**Many thanks to the  
LaMotta Family for hosting another fantastic  
Welcome Party!!!**





## Celebrating Our Graduates



Class of 2024

GME Graduation  
CMSRU  
Camden, NJ



PGY1

Graduates



## Ob/Gyn Graduation Celebration Adventure Aquarium, Camden, NJ



## Congratulations to the 2024 Graduation Ceremony Award recipients!

### Resident Awards

- Society for Maternal-Fetal Medicine Resident Award for Excellence in Obstetrics: *Anna White, DO*
- AAGL Resident Award for Excellence in Minimally Invasive Gynecology: *Anna White, DO*
- Society of Gynecologic Oncology Annual Award: *Blaire Nasstrom, DO*
- AUGS Award for Excellence in Female Pelvic Medicine and Reconstructive Surgery: *Blaire Nasstrom, DO*
- SLS Resident Achievement Award Outstanding MIS Resident 2023: *Blaire Nasstrom, DO*
- Ryan Program Resident Award for Excellence in Family Planning: *Anna White, DO*
- Society for Reproductive Endocrinology and Infertility: *Kyle Le, MD*

### Department Awards:

- Professionalism: *Danielle Schenker, MD*
- Social Media Award: *Emily Hahm, MD*
- Resident Teacher of the Year: *Blaire Nasstrom, DO*
- Resident of the Year: *Blaire Nasstrom, DO*

### Faculty Awards

- APGO Award for Excellence in Undergraduate Medical Education: *Lori Adriance, DO*
- CREOG Faculty Award for Excellence in Resident Education: *Simone Sweeney, MD*
- Resident Ally Award: *Lori Adriance, DO*



Dr. Adriance receives the  
Resident Ally Award

***We would like to extend our sincere appreciation to the faculty  
for sponsoring our graduation celebration.  
This event would not be possible without your generous support!***

***Thank you!***

**We would also like to thank the faculty who have  
provided breakfast during didactics.  
We truly appreciate you!**

Love Grows at Cooper

Dr. Caroline MacGillivray got engaged to Victoria Lord



Dr. Simone Sweeney got engaged to Theo Pottinger



**Congratulations!!!**

Dr. Sabrina Cafaro (Class of 2023) and Matthew Cafaro



Dr. Carly Ross and Jon Metter



Celebrating Dr. White's upcoming wedding with a Bridgerton tea party



Dr. Anna Gervais and Nate Gervais



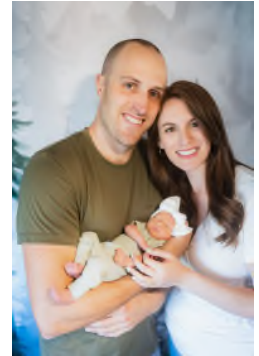
## OB/GYN Family Members

### Newest Additions to Our OB/GYN Family

Dr. Schenker (Class of 2024) and her husband Hayden welcomed their second child, Ava Linde Schenker, to the family.



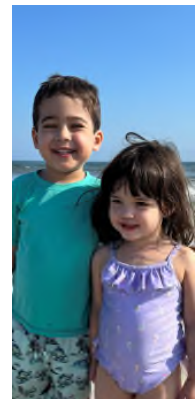
Dr. Blaire Nasstrom (Class of 2024) and her husband Dr. Michael Gedestad welcomed Autumn Acadia on 8/30/2024.



Dr. Malik's sons, AJ and Harvey



Dr. Adriance's son, Jack, and daughter, Madison.



Dr. Fischer's grandchildren



Dr. Bruckler and her family visited Vietnam



### Attention Class of 2025

#### ABOG Dates and Fees

2024 Specialty Qualifying Exam JULY 21, 2025

#### EXAM FEES IF PAID BETWEEN

Jan 3 - Feb 14, 2025 \$1,700

Feb 15 - Feb 28, 2025 \$1700 + \$400 late fee = \$2100

#### IMPORTANT DEADLINES

Jan 3, 2025

Applications available online

Feb 14, 2025

Last day to apply without late fee penalty

Feb 28, 2025

Final deadline

Jan 2024-Feb 2025

Candidates will be notified of approval to take the examination and

to make a Pearson VUE Testing Center computer reservation

Last day to reserve seat at Pearson VUE prior to seat block release

April 25, 2025

Qualifying Examination at Pearson VUE Testing Centers

July 21, 2025

### Special Events

Our residents enjoying a break at Resident Education Day on April 26<sup>th</sup>. This is an annual event sponsored by the OB society of Philadelphia.



Congratulations to Kyle Le, MD, for winning the prestigious S. Leon Israel Award. This award was established to recognize excellence in research in the discipline of obstetrics and gynecology.

Kyle's paper was titled: Parental Balanced Translocation Carriers do not have Decreased Blastulation Rates or Live Birth Rates Compared to Controls.



The residents surprised Sue with a Retirement Celebration on April 19th



And the Tony Award for Best Actor goes to Dr. Fischer!



In late July Dr. Fischer reprised the role of Tevya in the Moorestown Theater Company's production of Fiddler on the Roof.



## Important Dates & Announcements

### Important Dates:

October 11	Resident SIM
October 25	Junior Fellows Day
November 1	Resident SIM - TLH
November 22	Wellness Day
November 8, 13, 22	Residency Interviews
December 6, 13	Residency Interviews
January 3	Residency Interviews
January 15, 16, 17	CREOG In-training examinations
January 31	Wellness Day
February 14	Resident SIM
March 14	Resident SIM - TLH
March 28	Mock Orals PGY-2 & 3
April 11	Mock Orals PGY 1 & 4
May 2	Resident Education Day
May 9	Resident SIM - TLH
June 6	Resident Retreat
June 9	Resident-Fellow Research Dinner
June 10	Resident QI Project Presentation
June 19	Resident/Fellow Graduation Celebration



In honor of Dr. Ances, we have renamed our OB/GYN Alumni Fund to the I.G. Ances, M.D. Memorial OBGYN Alumni Fund for Resident Education and Wellness. Donations can be made in his memory to: *The Cooper Foundation, 101 Haddon Avenue, 08103* or online [HERE](#) and select Direct my gift to: *I.G.Ances, M.D Memorial OBGYN Alumni Fund for Resident Education and Wellness* in the drop-down menu.



We encourage you to send in updates so we can keep everyone apprised of current happenings in their personal and professional lives. Please send your updates and newsworthy information as well as any comments and suggestions to [mcfadden-susan1@cooperhealth.edu](mailto:mcfadden-susan1@cooperhealth.edu)