WELCOME TO OHSU PEDIATRIC RESIDENCY TRAINING
PEDIATRIC RESIDENCY PROGRAM

The Pediatric Residency Training Program at Oregon Health & Science University offers a three-year program that provides the specialized education and experience needed to care for children. The program emphasizes general pediatrics, including child advocacy and preventive medicine. Residents are exposed to a wide variety of patients from well children to the critically and chronically ill.

The program is centered around experiences at Doernbecher Children’s Hospital and uses community training sites to broaden the scope of the residents’ experience. Rotations occur at Emanuel Children’s Hospital, Kaiser Permanente Clinics, Doernbecher community pediatric clinics, school-based health centers, and private physician offices in both rural and urban settings.

After completing the program, 70% of our graduates practice primary care pediatrics, most of them in the Pacific Northwest. The rest pursue further subspecialty training. Many take advantage of pediatric subspecialty fellowships here at OHSU.

Doernbecher Children’s Hospital

As Oregon’s only academic children’s hospital since 1926, Doernbecher Children’s Hospital provides comprehensive services to the children and families of the region. The hospital is committed to the mission of patient care, education, research, and public service. Doernbecher’s services were consolidated into a new freestanding facility on the Oregon Health & Science University campus in 1998.

Doernbecher’s 126-inpatient beds includes 24 for school age children and adolescents, 24 for infants and toddlers, a 16 bed Compromised Host Hematology/Oncology Unit, and a 16-bed Pediatric Intensive Care Unit. Five operating rooms serve both inpatients and day surgery patients. The 46-bed Doernbecher Neonatal Care Center is adjacent to the Birthing Suite and Women’s Health /Mother Baby Unit in the OHSU hospital, where over 2,800 newborns are delivered annually.

Doernbecher also houses the ambulatory clinics for general pediatrics and resident continuity clinics, and pediatric and surgical subspecialty clinics, including child psychiatry. Continuity clinics for the residents also occur at three Doernbecher community based pediatric practices in the metropolitan area. Included in Doernbecher is the Child Development and Rehabilitation Center which provides interdisciplinary clinical services for children with developmental disabilities and other special health care needs.

There are more than 6,000 admissions yearly to Doernbecher Children’s Hospital and 50,000 visits to the ambulatory clinics. In addition, there are more than 15,000 pediatric visits to the Emergency Department. Patients are derived from the primary care base at OHSU or are referred; many are transported by the PANDA pediatric/neonatal transport team. Pediatric patients also come from the Northwest Kaiser Permanente Health System, which integrated with Doernbecher in 1996. Patients represent a variety of cultures, including Hispanic, Russian, and Southeast Asian, and a wide range of socioeconomic backgrounds.
Application Process

Applications to the Pediatric Residency Training Program must be submitted through the Electronic Residency Application Service (ERAS). Two letters of recommendation, besides the dean's letter, are required. A photograph of yourself is preferred. Applicants are invited for an interview based on the strength of their application.

We prefer that supporting material such as the dean's letter precede the interview, but we realize this is not always possible. It is the applicant's responsibility to determine that the ERAS application is completed on time.

***All materials must be received by the OHSU Pediatric Residency Training Program no later than Tuesday, Nov. 30, 2004. ***

When we receive your application, we will review it and then notify you by e-mail through the ERAS system to call and schedule an interview. Unfortunately, due to the volume of applicants, we cannot interview all applicants. Appointments are on weekdays only (except Thursdays), and last from 8:00 a.m. to 2:30 p.m., including lunch with residents. We generally interview from mid-October to the end of January. During your visit we will give you a tour of our facilities and you will have the opportunity to talk with residents and faculty.

If you are a graduate of a foreign medical school, you must have completed at least one year of pediatric residency within the United States or Canada. You must also provide a copy of a valid certificate from the Educational Commission for Foreign Medical Graduates, and participate in the National Residency Match Program and ERAS. In addition, applicants who are not U.S. citizens must be able to meet the requirements for an appropriate U.S. visa.

Lodging
Nearby lodging includes Doubletree Hotel Downtown, 310 SW Lincoln, 503-221-0450; Days Inn City Center, 1414 SW 6th, 503-221-1611; and the Portland Marriott City Center, 520 SW Broadway, 503-226-6300. To stay with a pediatric resident, call Laurie Ashenbrenner, Residency Coordinator, at 503-418-5170 or e-mail pedsres@ohsu.edu.

How to get to OHSU
If you will arrive by car, call 503-418-5170 to arrange for a campus parking pass. From the Portland airport, take either the MAX light rail Red Line OR Tri-Met bus 12 (Sandy Blvd.) to downtown Portland. From the downtown transit mall on SW 5th Avenue, transfer to bus 8 (Jackson Park) to OHSU.

For information, contact:
Laurie Ashenbrenner, Residency Coordinator
Dept. of Pediatrics, DC10S
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239-3098
503-418-5170
FAX 503-418-5199
pedsres@ohsu.edu
Rotations at a Glance

PL-1
Doernbecher Pediatric Clinic (3 months)
Mother-Baby Nursery
Emergency Medicine
Community-based Adolescent and Child Health (CACH)
Behavioral-Developmental Pediatrics
Doernbecher Neonatal Care Center
Doernbecher Inpatient Service (2 months)
Emanuel Inpatient Service (2 months)
Hematology/Oncology
Continuity Experience

PL-2
Pediatric Subspecialty Services (5 months)
Cardiology
Nephrology
Endocrine/Metabolism
Gastroenterology
Neurology
Pulmonology
Hematology/Oncology
Hematology/Oncology Night Float
Emergency Medicine
Primary Care (Community based)
Emanuel Inpatient Service
Doernbecher Neonatal Care Center
Pediatric Critical Care
Continuity Experience

PL-3
Elective Rotations (3 months)
Adolescent Health
Kaiser Ambulatory Clinic and Urgency Care
Doernbecher Pediatric Clinic
Chronic Illness and Disabilities
Doernbecher Inpatient Service (2 months)
Doernbecher Inpatient Night Float
Infectious Diseases
Doernbecher Neonatal Care Center
Pediatric Critical Care
Continuity Experience
**Rotation Descriptions**

**Adolescent Health**
This community-based experience provides residents with a focused experience in adolescent medicine. Residents see patients at Portland school-based health centers — Outside In, a clinic in downtown Portland for homeless youth; Kartini Clinic for adolescents with eating disorders; and DePaul Treatment Center for youth with substance abuse, depression, and adolescent adjustment problems.

**Behavioral-Developmental Pediatrics**
This rotation focuses on children with learning disabilities, attentional dysfunction, behavioral problems, and social skills deficits. Clinics are multi-disciplinary and supervised at the Child Development and Rehabilitation Center in Doernbecher by faculty with specialty training in pediatric development, behavior, and learning problems. Residents also rotate through CARES, a center for evaluating children who are victims of abuse.

**Chronic Illness and Disabilities**
On this rotation, residents learn about chronic health conditions and their impact on children by attending clinics at the Child Development and Rehabilitation Center in Doernbecher. Residents attend multidisciplinary clinics in genetics, spina bifida, hemophilia, cerebral palsy, neonatal follow-up, and pediatric rehabilitation. Supervision is by full time faculty with specialty training in pediatric behavior, development, disabilities, and ethics.

**Continuity Experience**
Each resident is a member of a team of residents at different levels of training headed by a faculty member from the Division of General Pediatrics. Residents have their clinic four times a month on the same half-day each week with an alternate morning or afternoon session to avoid post-call clinics. The continuity clinic has priority over all other experiences. Residents are encouraged to follow normal infants, children, and adolescents as well as patients with a variety of chronic and acute disorders. Continuity clinics occur in two major settings. Half of the residents have their clinics at Doernbecher on the main OHSU campus. The others are at three Doernbecher community clinics in Beaverton, Oregon City, and the Sellwood-Moreland district of Portland.

**Community-based Adolescent and Child Health (CACH)**
Residents experience children and adolescents in their natural environments, including camps, day care settings; preschools; and elementary, middle, and high schools. Hands-on experience is provided along with observations, supplemental readings, preparation of an ongoing advocacy project, and giving lectures to high school students, health professionals, and lay groups. Acute and preventative care services such as annual women’s health exams, STI assessments, options counseling, and emergency contraception are provided at Outside In, a clinic for homeless youth in downtown Portland and at Planned Parenthood.

**Doernbecher Inpatient Service**
Children admitted to Doernbecher Children's Hospital are cared for by two teams on a 48-bed inpatient unit. One team (Coast Team) cares for patients who are part of a well-established HMO, Northwest Kaiser-Permanente. The other team (Hood Team) cares for patients of the OHSU health care system. Subspecialty service patients are divided between the two teams. Physicians from Kaiser Permanente are the attendings for the Coast Team. The Hood Team attending is usually a hospitalist faculty member from the Division of General Pediatrics. Problems manifested represent the full spectrum of pediatric illnesses.

**Doernbecher Inpatient Night Float**
A third year resident works 14-hour duty shifts at night from Monday through Thursday. This allows the Inpatient team senior residents to rarely be post-call during the weekdays and provides continuity of patient care.

**Doernbecher Neonatal Care Center**
This is a 46-bed Level 2 and 3 neonatal intensive care unit. Residents care for ill newborns with medical and surgical problems, attend high-risk deliveries, and respond to issues in the Mother-Baby Nursery at night. The nursery is an "open unit" accepting admissions of neonates who have been home from the hospital. Thus, residents develop a familiarity with a wider spectrum of problems as compared to a typical NICU experience.

**Doernbecher Pediatric Clinic**
This outpatient care facility on the seventh floor of Doernbecher Hospital includes general pediatric and pediatric subspecialty clinics. In this setting, residents have block rotations in general pediatrics, continuity clinics, and the ambulatory portion of their subspecialty rotations.
Elective Rotations
There are three elective months without call. Residents design their elective months to add experiences to their liking. This may include research, intensive training in a particular aspect of pediatrics, or experience in a specialty outside of pediatrics. Many residents choose an international health experience as an elective. An elective month may be moved to the second year by moving Primary Care to the third year.

Emanuel Hospital Inpatient Service
Emanuel is a private community hospital in northeast Portland, a 10-minute drive from the OHSU campus. Residents care for a mix of more common, general pediatric problems. Supervision is provided by a combination of full-time staff, community pediatricians, and private pediatric subspecialists, thus exposing the resident to a different perspective on patient management.

Emergency Medicine
Residents do eight- to twelve-hour shifts in the OHSU Emergency Department during their first and second year. There are over 15,000 pediatric visits annually to the Emergency Department. Residents are supervised by a combination of faculty who are trained in emergency medicine and pediatric emergency medicine.

Hematology/Oncology
This experience is in the 16-bed inpatient Hematology/Oncology Unit in Doernbecher Hospital. Residents are integrated into the multidisciplinary team managing patients under the supervision of faculty from the Division of Hematology/Oncology.

Hematology/Oncology Night Float
A second year resident works a 12-hour night shift caring for patients on the Hematology-Oncology Inpatient Service on the 10th floor of Doernbecher Hospital. This eases the workload for the residents on the daytime Hematology/Oncology team. The schedule is 3 nights on duty, followed by 2 nights off for the duration of the rotation.

Infectious Diseases
This third year sub-specialty experience has the resident doing consultation and clinics in infectious diseases. Residents also participate in teaching conferences, including the City-wide Adult/Pediatric ID conference.

Kaiser Ambulatory Clinic and Urgency Care
Kaiser-Permanente is a large health maintenance organization with clinics throughout the metropolitan and suburban areas. The resident works in a busy, efficient, ambulatory care setting under the supervision of Kaiser staff pediatricians. This experience includes after-hours urgency care.

Mother-Baby Nursery
This first-year rotation provides experience with normal newborn infants. All infants room in with their mothers. The resident gains experience in counseling new mothers, develops proficiency in examining normal newborns, and learns to recognize disorders of newborn transition. Supervision is by faculty in the Division of General Pediatrics. PL-3 residents on their Doernbecher Pediatric Clinic month return in the mornings to this site for a “refresher” before graduation.

Pediatric Critical Care
Critically ill or injured infants and children are cared for in the sixteen bed Pediatric Intensive Care Unit at Doernbecher. Residents are supervised by an in-house board eligible/certified pediatric intensivist 24 hours a day. Patients with surgical problems are co-managed by the pediatric service, including trauma patients and pre- and post-operative cardiac patients.

Pediatric Subspecialty Services
Residents spend five months in the second year focusing on pediatric subspecialties in Cardiology, Endocrine/Metabolism, Gastroenterology, Nephrology, Neurology, and Pulmonology. Residents do inpatient consults, attend subspecialty ambulatory clinics, and associated teaching conferences.

Primary Care (Community based)
Experience primary care pediatrics outside of the University health care system in an urban or rural private practice, inside or outside Oregon. Residents develop an understanding of the workings of an office practice, including the business of pediatrics, managing a large patient volume, and different practice styles.
Resident Conferences

**Daily Conferences**
Inpatient morning reports and noon conferences

**Weekly Conference**
Pediatric Grand Rounds

**Monthly Noon Conferences**
- Pediatric Department M&M
- Pediatric-Emergency Medicine M&M
- Journal Club
- Child Abuse conference
- Ethics conference
- Residents’ meetings

**INPATIENT MORNING REPORT**
A resident from the inpatient service presents a recently admitted patient. The department chairman directs discussion among house staff and faculty to construct a detailed differential diagnosis. Radiographic and audiovisual material are often used to enhance the discussion and learning.

**PEDIATRIC GRAND ROUNDS**
Pediatric faculty, community pediatricians, residents, and students attend this weekly session held September through June. Various pediatric topics, including research advances and challenging clinical cases, are presented.

**PEDIATRIC-EMERGENCY MEDICINE M&M**
A monthly conference is held jointly with the Department of Emergency Medicine to discuss interesting pediatric patients who initially presented to the Emergency Department. This conference is attended by pediatric and emergency medicine residents and faculty. Patients are presented by residents from both departments. The case presentation format allows discussion of differential diagnoses and treatment plans, facilitating communication between the two departments.

**PEDIATRIC NOON CONFERENCE**
The Pediatric Conference, during the first 10 weeks of each residency year, provides a comprehensive review of how to manage pediatric emergencies and basic pediatric topics. After the summer core series, the topics cover each pediatric subspecialty, surgical problems, and pain management. PL-2 and 3 residents each give one noon lecture annually. To add fun, the chief resident hosts a Jeopardy game several times each year. Standing monthly meetings also fill this time slot: residents’ meetings, pediatric journal club, a child abuse conference, and an ethics conference.
Salaries, Vacation, Benefits
2004-2005 Stipends

PGY1 $39,367
PGY2 $41,542
PGY3 $43,775

Residents receive a debit card to purchase meals, which is prepaid by the hospital, based on the frequency of call. White lab coats and business cards are also provided.

Vacation and Leave
Residents receive nearly four weeks of paid vacation per year. Vacation is taken in three blocks spaced throughout the year. These vacation blocks are “outside” of the call schedule. Thus, the call schedule does not change from q4 to q3 as residents take vacation.

The 10 days in late December through New Year’s Day are outside of the rotation schedule. During this time, critical services are covered by one half of the residents. Each resident has a block of five days off during this holiday time.

Five days are available for educational leave. Travel money is available from the department to assist residents who attend a medical meeting. Two weeks per year of personal leave is granted and can be accrued. Maternity/paternity leave is available in line with state and federal law.

Insurance
Various medical, dental, life, and disability insurance options are available to residents and their families. Residents receive a monthly stipend (in addition to salary) to purchase these benefits. Medical liability coverage is provided through the State of Oregon.

Other Events
The year begins with a week of orientation, including certification in Pediatric Advanced Life Support and Neonatal Resuscitation. This week gives the new residents a chance to get acquainted and meet faculty and residents in the program. In September, residents and their guests attend an off-campus weekend retreat to socialize and attend workshops to enhance evaluation, teaching, and other skills.
WHERE ARE OUR RESIDENTS FROM? 2003-2004

<table>
<thead>
<tr>
<th>PL-1</th>
<th>PL-2</th>
<th>PL-3</th>
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<tbody>
<tr>
<td>Misty Carlson – U Pittsburgh</td>
<td>Rebecca Baird - OHSU</td>
<td>Laura Bullen - New York U</td>
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<tr>
<td>Christina Gerhardt – U Alabama</td>
<td>Mark Bergeron - Creighton U</td>
<td>Christine Chen - U Texas, San Antonio</td>
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<td>Monica Gramatges – U Texas, Houston</td>
<td>Katie Burco - OHSU</td>
<td>Kirsten Crowley - UCLA</td>
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<td>Hilary Knapp – U Nebraska</td>
<td>Jeff Darst - U Nebraska</td>
<td>Erin McArthur - Tulane</td>
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<tr>
<td>Wes Miller – Louisiana State U</td>
<td>Joey Gassen - U Alabama</td>
<td>Lon McQuillan - U Utah</td>
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<td>Bob Nash – U Chicago, Pritzker</td>
<td>Jesse Lock - Albany Medical College</td>
<td>Molly Molloy - UC Davis</td>
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<tr>
<td>Caroline Ozment – U South Alabama</td>
<td>Jodie Oltmans - OHSU</td>
<td>Megan Neuman - U Wisconsin</td>
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<tr>
<td>Tony Reid – U Oklahoma</td>
<td>Michelle Sorensen - U Minnesota</td>
<td>Carrie Phillipi - UC Davis</td>
</tr>
<tr>
<td>Tammy Wagner – Tulane</td>
<td>Sridevi Venigalla - Siddhartha Medical College</td>
<td>Jennifer Slickers - U Virginia</td>
</tr>
<tr>
<td>Beau Weill – Albany Medical College</td>
<td>Ken Wu - U Med &amp; Dentistry of New Jersey</td>
<td>Meri Todd - Vanderbilt</td>
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Chief Resident: Karla Hennebold - U. Utah

OUR GRADUATES - WHERE ARE THEY NOW?

Initial Positions after Residency Graduates 1999-2003 = 60

<table>
<thead>
<tr>
<th>General Pediatrics</th>
<th>17</th>
</tr>
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<tbody>
<tr>
<td>Oregon and Washington</td>
<td></td>
</tr>
<tr>
<td>General Pediatrics</td>
<td>12</td>
</tr>
<tr>
<td>Other states</td>
<td></td>
</tr>
<tr>
<td>Fellowship</td>
<td>15</td>
</tr>
<tr>
<td>Chief Resident</td>
<td>6</td>
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<tr>
<td>Other Residency</td>
<td>2</td>
</tr>
<tr>
<td>Locums</td>
<td>5</td>
</tr>
<tr>
<td>Military Service</td>
<td>2</td>
</tr>
<tr>
<td>Hospitalist</td>
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</table>

Current Careers of Resident Graduates 1999-2003

<table>
<thead>
<tr>
<th>General Pediatrics</th>
<th>42 (70%)</th>
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<tbody>
<tr>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>HMO</td>
<td>7</td>
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<tr>
<td>Group</td>
<td>26</td>
</tr>
<tr>
<td>Hospitalist</td>
<td>3</td>
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<tr>
<td>Other</td>
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<table>
<thead>
<tr>
<th>Pediatric Subspecialty</th>
<th>18 (30%)</th>
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<tr>
<td>Neonatology</td>
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<tr>
<td>Hematology-Oncology</td>
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<tr>
<td>Intensive Care</td>
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<tr>
<td>Endocrinology</td>
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<tr>
<td>Gastroenterology</td>
<td>1</td>
</tr>
<tr>
<td>Cardiology</td>
<td>1</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>1</td>
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<tr>
<td>Adolescent Medicine</td>
<td>2</td>
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<tr>
<td>Epidemic Intelligence Service</td>
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<tr>
<td>Emergency Medicine</td>
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</tbody>
</table>
Our Faculty

Adolescent Health
C. Wayne Sells, MD, MPH
Jennifer Gilhooly, MS, PNP

Breast-Feeding
Pam Hellings, PNP, PhD

Cardiology
Seshadri Balaji, MD
Grant Burch, MD
Paul Droukas, MD
Victor Menashe, MD
Mary Minette, MD
Mark Reller, MD
Mary Rice, MD
David Sahn, MD
Robin Shaughnessy, MD
Michael Silberbach, MD

Cardiothoracic Surgery
Irving Shen, MD
Ross Ungerleider, MD

Child Abuse
Joseph Zenel, MD

Critical Care
Dana Braner, MD
Miles Ellenby, MD
Laura M. Ibsen, MD
Aileen Kirby, MD
Robert Steelman, MD
Ken Tegtmeyer, MD

Emergency (Pediatric)
Beverly Bauman, MD
Robert Cloutier, MD
Helen Miller, MD
Eustacia “Jo” Su, MD
Craig R. Warden, MD, MPH

Endocrinology
Bruce Boston, MD
Cheryl Hanna, MD
Stephen LaFranchi, MD
Dan Marks, MD
Vickie Nichols, MN, PNP

Feeding
Arthur Jaffe, MD
Annie Terry, MD

Gastroenterology
Glenn Gourley, MD
Annie Terry, MD

General Pediatrics
Cindy Ferrell, MD
Gail Jacoby-Low, MD
Chris Grucella, MD
Jim Hartford, MD
Art Jaffe, MD
Tim Jeffreys, MD
Windy Lammers, MD
Marlo McIlraith, MD
Jeff Miller, MD
Julie O’Keefe, MD
Monique Pritchard, MD
Jim Resk, MD
Steve Shipman, MD
Joanne Wong, MD
Joe Zenel, MD

Hematology/Oncology
Robert Butler, PhD
Kamar Godder, MD
F. Leonard Johnson, MD
Srinivasa Nagalla, MD
H. Stacey Nicholson, MD, MPH
Gregory Thomas, MD
Dave Tilford, MD
Lawrence Wolff, MD

Immunology/Rheumatology
Michael Borzy, MD

Infectious Diseases
Deborah Lewinsohn, MD
Paul Lewis, MD
Michael Miller, MD

Neonatology
Gerda Benda, MD
Charlene Crichton, MD
Joseph Gilhooly, MD
Cynthia McEvoy
De-Ann Pillers, MD, PhD
Sue Ann Smith, MD
Patricia Spitalme, MD
Linda Wallen, MD

Nephrology
Amira Al-Uzri, MD
Robert Mak, MD
David Rozansky, MD

Neurology
Stephen A. Back, MD, PhD
Thomas Koch, MD
Colin Roberts, MD
Barry Russman, MD

Neurosurgery
Nathan Selden, MD

Ophthalmology
Laurie Christensen, MD
Earl Palmer, MD
Ann Stout, MD
David Wheeler, MD

Orthopaedics
Rodney Beals, MD
Ronald Turker, MD

Otolaryngology
Henry Milczuk, MD

Pain Management
Richard Carr, MD
Dale Harrison, MPH
Angela Kendrick, MD
Jeffery L. Koh, MD, MBA
Kirk Lalwani, MD
Terrence McGraw, MD

Psychiatry, Child & Adolescent
Kyle Johnson, MD
Robert McKelvey, MD
Kathleen Myers, MD, MPH
Nancy C. Winters, MD

Pulmonary
Holger Link, MD
Michael Powers, MD
Michael Wall, MD

Pediatric Radiology
Katherine Hopkins
Pediatric Surgery
Thomas Curran, MD
Marvin Harrison, MD
Mark Silen, MD, MBA

Urology
Steven Skoog, MD

Child Development and Rehabilitation Center:
Cleft Palate/ Craniofacial
Henry Milezuk, MD
Wayne Ozaki, MD
Nathan Selden, MD
Thomas Wang, MD

Dentistry
Peter Lax, DMD

Developmental Pediatrics
Peter Blasco, MD
Phillip Brenes, MD
Sarojini Budden, MD
Patricia Garilinger, MD
Mark Merkens, MD
Rita Panoscha, MD
Christopher Williams, MD

Genetics/ Birth Defects
Markus Grompe, MD
Susan Hayflick, MD
Ellen Magenis, MD
Robb Moses, MD
Jacob Reiss, MD
Robert Wildin, MD
Jonathan Zonana, MD

Hemophilia
Gregory Thomas, MD
Lawrence Wolff, MD

Metabolism
Markus Grompe, MD
Cary Harding, MD
David Koehler, MD
Robert Steiner, MD

Spina Bifida
Mark Merkens, MD
Nathan Selden, MD, PhD
Kent Vincent, MD

Kaiser Permanente:
General Pediatrics
Eric Brody, MD
Beryl Burns, MD
Richard Cohen, MD
Janie Cox, MD
Marianne Dwyer, MD
Virginia Feldman, MD
Deborah Helms, MD
Robert Hornbeck, MD
Jeff Liebo, MD
Rajished Lints, MD
Joyce Liu, MD
Linda Lorenz, MD
Mike McNamara, MD
William Morris, MD
Robert Peterson, MD
Daniel Rappaport, MD
Kari Smart, MD
Mike Wilmington, MD

Infectious Disease
Colleen Chun, MD

Emanuel Hospital:
Cardiology
Douglas King, MD
David McIrvin, MD
Marc LeGras, MD

Child Abuse
Lila Keltner, MD

Endocrinology
Maya Hunter, MD
Mark Kummer, MD
Karin Selva, MD
David Snyder, MD

Gastroenterology
Glen Barclay, MD
William Marshall, MD

Genetics
George Anadiotis, MD.
Lori Hankenson, MD

General Pediatrics
Molly Burchel, MD
Tammy Hasket, MD
Doreen Norwood, MD
Dolores Orfanakis, MD
Johnny Sun, MD

Hematology/Oncology
Julie Chu, MD
Vic Kamwar, MD
Kevin Norwood, MD
Janice Olson, MD

Infectious Disease
Stephen Johnson, MD
Ann Loeffer, MD
John Paisley, MD

Intensive Care
Peter Quint, MD
Cindy Cristofani, MD
James Lindsay, MD

Nephrology
Randy Jenkins, MD

Neurology
Michelle Metrick, MD
P.J. Pohowalla, MD

Rehabilitation
Janice Cockrell, MD
Mark Shih, MD

Surgery
David Bliss, MD
Tim Campbell, MD
Tom Curran, MD
Mary Helikson, MD

Urology
David Lashley, MD
Patrick O’Holloren, MD
**Portland, Oregon**

From its vantage point on a wooded Portland hilltop, the OHSU campus has one of the most spectacular views in Oregon. From Doernbecher Children’s Hospital you can see the Willamette River winding its way through the city and its dozen bridges linking east and west Portland neighborhoods. Pleasure boats and commercial barges steam up the river channel past skyscrapers, park benches, marinas, and jogging trails. With a population of a million and a half within the metro area, Portland is Oregon’s largest metropolis, and has been named one of the most livable cities in America. Downtown Portland bustles with culture and commerce: museums and galleries; a thriving theater community and music scene; dozens of parks, plazas, and gardens; a zoo; mass transit system; an NBA basketball team; and a wide variety of shops and restaurants. Radiating out in all directions are diverse and affordable neighborhoods in a setting that’s hilly, green, and clean.

In the near distance, snow-capped Mt. Hood towers above its neighbors in the Cascade range, beckoning outdoor enthusiasts to its ski slopes, campsites, and hiking trails. There are more mountains to the west, beyond which lies Oregon’s pristine and rugged coastline. Oregon is famous for its varied terrain, its rivers and lakes, desert and rangeland, national forests and parks. Much of Oregon’s land is publicly owned, providing thousands of acres of wilderness. In fact, Portland alone contains 37,000 acres of park land, including Forest Park, the largest urban wilderness in any American city.

Oregonians are proud of their environment and work to protect their natural resources. The economy is sustained by the forest products industry and agriculture, as well as tourism, biomedical and computer-tech industries, and manufacturing.

Portland’s weather is mild most of the year. It’s green for a reason — it does rain in the winter and spring. Temperatures rarely go below freezing and summers are sunny and warm.

When you come for an interview, ask for our Portland Day Trip Guide to help you explore our beautiful city.