

To Schedule an Appointment or to Make a Referral

212.342.1155

Practice Locations

NewYork-Presbyterian/Columbia

Herbert Irving Pavilion
161 Fort Washington Avenue, 8th Floor
New York, NY 10032

ColumbiaDoctors Midtown

51 West 51st Street, Suite #380
New York, NY 10019

ColumbiaDoctors Riverdale

3050 Corlear Avenue, Suite #204
Bronx, NY 10463

NewYork-Presbyterian Medical Group/Westchester

685 White Plains Road
Eastchester, NY 10709

NewYork-Presbyterian Medical Group/Hudson Valley

1978 Crompond Road, Suite #101
Cortlandt Manor, NY 10567

columbiasurgery.org/colorectal

NewYork-Presbyterian
Columbia University Medical Center

Division of Colorectal Surgery
NewYork-Presbyterian/
Columbia University Medical Center
161 Fort Washington Avenue
New York, NY 10032

NewYork-Presbyterian
Columbia University Medical Center



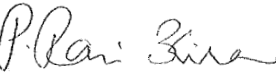
Over the past year, the Division of Colorectal Surgery at NewYork-Presbyterian/Columbia University Medical Center has expanded significantly for the care of simple and complex colorectal conditions. We now provide clinical expertise and resources that are available at few other centers in the world.

Our physicians see patients at five convenient locations in the Bronx, Midtown Manhattan, Westchester, and the Hudson Valley. Patients benefit from the availability of same day appointments and imaging and laboratory testing that can be done on site on the same day as the office visit.

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I am pleased to provide you with an update on the Division of Colorectal Surgery at NewYork-Presbyterian/Columbia University Medical Center. The Division offers unparalleled expertise in the management of simple and complex conditions related to the small intestine, colon, rectum, and anal canal. State-of-the-art endoscopic, laparoscopic, and robotic surgery, as well as other minimally invasive approaches are routinely used to decrease post-procedure pain and shorten recovery times.

We are very proud of our health care team and the outstanding experience they provide. Please contact us if you have any questions. We look forward to working with you to care for your patients.



P. Ravi Kiran, MBBS
Chief, Division of Colorectal Surgery
NewYork-Presbyterian/
Columbia University Medical Center

Program Highlights

Patient Experience

- Imaging or blood work available on the same day as office visit
- Cancer navigator – a dedicated nurse liaison who coordinates patient care across medical and surgical disciplines
- Enterostomal therapist who provides education and support for patients with an ostomy

Comprehensive Care

Cancer Individualized care is determined in collaboration with medical and radiation oncologists, radiologists, pathologists, geneticists, and our cancer navigator; advanced treatments include colon and rectal cancer surgery and and IORT (intraoperative radiation therapy)

Inflammatory Bowel Disease (IBD) We work closely with world-class gastroenterologists who have expertise in IBD management

Pelvic Floor Disorders Our programs include anorectal physiology, anal ultrasound, biofeedback therapy, sacral nerve stimulation, ventral rectopexy, and injection therapy for incontinence and obstructive defecation

Diverticulitis Treatment is guided by National Society guidelines published in 2014; our faculty assisted in drafting these guidelines

Anorectal Problems We offer advanced procedures that include function-preserving techniques; stapled hemorrhoidectomy and the LIFT (ligation of intersphincteric fistula tract) procedure for anal fistulas; TEMS (transanal endoscopic microsurgery); and TAMIS (transanal minimally invasive surgery) and muscle-sparing operations for recalcitrant anal fissures

Advanced Surgical Techniques

- Minimally invasive surgery; laparoscopic and robotic surgery
- Pouch – primary/redo pouch repair procedures
- Continent ileostomy creation
- Continence preservation procedures
- Advanced procedures for complex IBD
- SNS, biofeedback, ventral rectopexy, sphincter repair, and procedures for fecal incontinence and constipation
- SILS (single incision laparoscopic surgery), CELS (combined endo-laparoscopic surgery), sphincter preservation for fissures, TEMS (transanal endoscopic microsurgery), and TAMIS
- Complex IBD, reoperative abdominopelvic surgery, recurrent and advanced colon and rectal cancer surgery, pelvic exenteration, and IORT (intraoperative radiation therapy)

Evidence-Based Management

- Infection reduction program that has significantly reduced postoperative infections
- Protocols and pathways that guide pre-, intra-, and postoperative care

Division of Colorectal Surgery Team

P. Ravi Kiran, MBBS

Dr. Ravi Kiran provides expertise in complex and reoperative colorectal surgery and IBD. Cleveland Clinic trained, Dr. Kiran has authored more than 200 peer-reviewed publications and is an editor and reviewer for numerous prominent journals and textbooks. He was elected to the Cleveland Best Doctors list, and is a Castle Connolly Top Doctor.

Daniel L. Feingold, MD

Dr. Daniel Feingold completed two advanced surgery fellowships in Colorectal Surgery and in Surgical Oncology. Dr. Feingold holds the Stanley Edelman, MD-Stephen Jarislowsky Endowed Chair in Surgery and has been named a Castle Connolly Top Doctor for the past three years.

Steven A. Lee-Kong, MD

Dr. Steven Lee-Kong is highly trained in advanced robotic surgery for a variety of colorectal conditions, including cancer. Dr. Lee-Kong has a special interest in minimally invasive surgery and is responsible for evaluating and adopting new technologies for use in the Division of Colorectal Surgery. He has just been named to the New York Super Doctors Rising Stars 2016 list.

Emmanouil Pappou, MD, PhD

After completing his PhD in research of human stem cells, Dr. Pappou trained at Johns Hopkins Hospital in Surgery, Surgical Oncology, and Colorectal Surgery. In addition to treating the spectrum of colorectal diseases, Dr. Pappou leads the Division’s Pelvic Floor Center working with gastroenterologists, urologists, and gynecologists on problems related to colon transit, constipation, pelvic floor and evacuatory dysfunction, as well as fecal incontinence.