COURSE CHAIR: Amy Kaji, M.D., M.P.H.
PHONE #: (310) 222-3500
FAX: N/A
E-MAIL: N/A
SUPPORTING FACULTY: Scott Votey, M.D.; M. Wilson, M.D., Dir., Disaster Education, L.A. EMS Agency; B. Koenig, M.D., Medical Dir., L.A. EMS Agency; J. Eades, RN; A. Uner, M.D.; S. Rottman, M.D.
STUDENT COORDINATOR: Jason Bergschneider
PHONE #: (310) 267-0442
FAX: N/A
E-MAIL: jbergschneider@mednet.ucla.edu
REPORT TO: Dr. Kaji @ 9:00 in the Depart. of Emergency Medicine Office, D-9 @ 9:00
PREREQUISITES: Inpatient Internal Medicine and Surgery
AVAILABLE FOR EXTERNALS: Yes
STUDENTS / PERIOD: max 8 min 1
DURATION: 2 weeks
2007-2008 ROTATIONS BEGIN WEEKS: 18
DESCRIPTION: An introduction to disaster medicine and the unique concerns that a disaster presents to medical personnel and the community. Students participate in didactic sessions, visit L.A. agencies that manage disaster situations, obtain Basic Disaster Life Support (BDLS) certification, and work independently to critique and discuss historical disasters and the problems encountered in their management. Students study the HEICS system and apply their knowledge in both simulated incident command scenarios and in the annual L.A. county-wide disaster drill. Visitation to county disaster management agencies, independent study, and attendance at all didactic sessions are required. Students attend one Saturday meeting of the local DMAT team during which they learn about the DMAT and disaster response and preparedness.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Triage in disaster setting
2. Decontamination
3. Evacuations
4. Hazard-specific pathology
5. Public Health concerns
6. Mental Health concerns after disasters
7. Recovery & disaster effects
8. Safety, security, and support issues

COURSE OBJECTIVES (in order of importance)
1. Describe what constitutes a “disaster,” and how EMS and local services (hospitals, law enforcement, fire department) coordinate and communicate during disaster situations.
2. Learn terminology: disaster, mass casualty incident, hazard vulnerability analysis (HVA), All-Hazards Preparedness, MASS triage, decontamination, personal protective equipment, disaster medical assistance team (DMAT), hazardous materials (HAZMAT), disaster mortuary operational response team (DMORT), veterinary medical assistance team (VMAT), federal emergency management agency (FEMA), federal response system, and national disaster medical system (NDMS).
3. Describe how hospital emergency incident command systems (HEICS) and physicians operate under disaster conditions.
4. Develop understanding of pathophysiologic conditions that result from natural disasters, man-made accidents, explosions, nuclear, and biological, and chemical events.
5. Participate in a county-wide disaster drill and simulations of incident command operations.
6. Obtain Basic Disaster Life Support (BDLS) certification.
7. Understand the structure and operation of DMATs, and participate in the local DMAT meetings occurring during elective.
8. Describe public health role in disaster response.
9. Analyze historical disasters and their management.
10. Understand regulatory and legal issues as they pertain to disaster medicine.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: N/A
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: N/A

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students will be required to spend one Saturday with the local DMAT team.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective requires multiple site visits throughout the Los Angeles area. Students must provide their own transportation to the sites. This course is endorsed by the Acute Care College.
EM320.01  EMERGENCY MEDICINE

Subinternship Location: CHS/OVH 2007-2008

Revised: 12/03/07

STUDENT EXPERIENCES

CLOSE CONTACT WITH:
- X FULL-TIME FACULTY
- X CLINICAL FACULTY
- X FELLOWS
- X RESIDENTS
- INTERNS

OTHER:

COMMON PROBLEMS/DISEASES
1. Major & Minor Trauma
2. Cardiac Emergencies: Chest Pain
3. Acute Respiratory Distress
4. Acute Febrile Illness
5. Toxicology
6. Altered Mental Status
7. Abdominal Pain & Ob/Gyn Emergencies
8. Suturing Techniques

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 37 - 38
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 1,375

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Trauma Conference</td>
<td>Primary Patient Care</td>
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<td></td>
<td>Primary Patient Care</td>
<td>Primary Patient Care</td>
<td>Student Lectures</td>
<td>Grand Rounds</td>
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<td>Primary Patient Care</td>
<td>Resident Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Shifts are either 1500 to 2300 or MN-0800 at UCLA and 0800 to 1600, 1600 to 2400 and 2400 to 0800 at OVMC, including weekends. Attendance at all conferences is mandatory regardless of rotating schedule.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: There will be ample opportunity to perform procedures (laceration repair, venous access, slit lamp examination, ENT procedures, etc.) The clinical experience will be supplemented through lecture, rounds, and formal conferences. Externs with an interest in Emergency Medicine encouraged. E-mail Dr. Baraff with dates desired and postgraduate training interests.

AVAILABLE FOR EXTERN: Yes

STUDENTS / PERIOD: 4 min 1

DURATION: 3 weeks

2007-2008 ROTATIONS BEGIN WEEKS: 1, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 42, 45, 48 (not offered wk 2)

DESCRIPTION: This course will provide didactic and clinical training in Emergency Medicine. Students will be given graded responsibility commensurate with their abilities in a setting of supervision by Emergency Department faculty and senior residents. The course will be equally divided: 1 1/2 weeks at UCLA and 1 1/2 weeks at Olive View-UCLA Medical Centers. Students will be part of the Emergency Medicine health care team. After obtaining a pertinent history and selected physical examination, the student will discuss diagnostic and therapeutic plans with the faculty. Students will then carry out this plan and follow their patients through until discharge or admission to the hospital.

STUDENT COORDINATOR:
Mickey Murano (310) 794-0586
E-MAIL: mmurano@mednet.ucla.edu

SUPPORTING FACULTY:
UCLA and Olive View Emergency Medicine Faculty

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
- There will be ample opportunity to perform procedures (laceration repair, venous access, slit lamp examination, ENT procedures, etc.)
- The clinical experience will be supplemented through lecture, rounds, and formal conferences.
- Externs with an interest in Emergency Medicine encouraged.
- E-mail Dr. Baraff with dates desired and postgraduate training interests.

STUDENT EXPERIENCES

CLOSE CONTACT WITH:
- FULL-TIME FACULTY
- CLINICAL FACULTY
- FELLOWS
- RESIDENTS
- INTERNS

OTHER:

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 37 - 38

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 1,375

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<td>AM</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Trauma Conference</td>
<td>Primary Patient Care</td>
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<td>Primary Patient Care</td>
<td>Student Lectures</td>
<td>Grand Rounds</td>
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<td>Primary Patient Care</td>
<td>Resident Conference</td>
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<td>M &amp; M</td>
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<td>Primary Patient Care</td>
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<td>PM</td>
<td>Primary Patient Care</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Shifts are either 1500 to 2300 or MN-0800 at UCLA and 0800 to 1600, 1600 to 2400 and 2400 to 0800 at OVMC, including weekends. Attendance at all conferences is mandatory regardless of rotating schedule.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: There will be ample opportunity to perform procedures (laceration repair, venous access, slit lamp examination, ENT procedures, etc.) The clinical experience will be supplemented through lecture, rounds, and formal conferences. Externs with an interest in Emergency Medicine encouraged. E-mail Dr. Baraff with dates desired and postgraduate training interests.
EM320.02  EMERGENCY MEDICINE

Subinternship Location: HARBOR 2007-2008
Revised: 1/18/07

STUDENT EXPERIENCES
CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Nurses, paramedics

COMMON PROBLEMS/DISEASES
1. Chest pain
2. Dyspnea
3. Lacerations
4. Orthopedic injuries
5. Cutaneous infections
6. Altered mental status
7. Overdose
8. Abdominal pain
9. Trauma

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 15 - 20
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 500

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Day</th>
<th>AM</th>
<th>PM</th>
<th>Thursday</th>
<th>Friday</th>
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<tbody>
<tr>
<td></td>
<td>7:00</td>
<td>7:00</td>
<td>8:00 - Core Curriculum</td>
<td>8:00 – 10:00</td>
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<tr>
<td></td>
<td>Morning Rounds</td>
<td>Morning Rounds</td>
<td>9:00 - Case Conf.</td>
<td>Grand Rounds</td>
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<td></td>
<td>8:00 – 12:00</td>
<td>7:00 – 3:00</td>
<td>9:30 - Procedure Conf.</td>
<td>9:00 - M&amp;M Conf.</td>
</tr>
<tr>
<td></td>
<td>Medical Student Lecture Day (1st day)</td>
<td>Community ED OR Procedure Shift</td>
<td>10:00 - Medical Student Conf.</td>
<td>10:00 - Journal Club</td>
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<td>Patient Care</td>
<td>Or</td>
<td>Patient Care</td>
<td>Patient Care</td>
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<tr>
<td></td>
<td></td>
<td>7:00 – 3:00</td>
<td>1:00 – 8:00 Paramedic Ride-Along</td>
<td>4:30 Evening Rounds</td>
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<tr>
<td></td>
<td></td>
<td>Procedure Shift</td>
<td>4:30 Evening Rounds</td>
<td>4:30 Evening Rounds</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students spend 40 hours per week in the department, which includes weekend and night shifts.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: *Students may choose to do 3 weeks or 4 weeks during this time period.

DESCRIPTION: Harbor-UCLA Medical Center is a level 1 trauma center seeing more than 90,000 patients per year. Students assume primary responsibility for the care of trauma patients, critical medical and pediatric patients, orthopedic injuries, and other emergencies. Students function as an integral part of the Emergency Medical Team. They have the opportunity to experience the prehospital system and a community ED.
COURSE CHAIR: Drs. C. Choi and B. Heller  
PHONE #: (562) 491-9350  
E-MAIL: cchoi@chw.edu

SUPPORTING FACULTY: Emergency Room Staff

STUDENT COORDINATOR: Sylvia Perez  
PHONE #: (562) 491-9350  
E-MAIL: sylvia.perez@chw.edu

REPORT TO: Department of Medical Education, 1050 Linden Ave., Long Beach, CA 90815

PREREQUISITES: Medicine and Surgery Clerkships

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2007-2008 ROTATIONS BEGIN WEEKS: 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: Students will initiate the evaluation and assessment of Emergency Medicine patients, discuss their findings and plans with the EM attending physician, and work directly with the emergency medicine healthcare team to carry out the diagnostic and treatment plans. The attending physician provides the primary teaching input with additional input from residents rotating in the department and consultants involved in the care of the patient in the Emergency Department.

STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 0%</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major and minor trauma</td>
<td></td>
<td>X FULL-TIME FACULTY</td>
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<tr>
<td>Acute cardiac emergencies</td>
<td>100%</td>
<td>X CLINICAL FACULTY</td>
</tr>
<tr>
<td>Pulmonary edema</td>
<td>0%</td>
<td>X FELLOWS</td>
</tr>
<tr>
<td>Acute respiratory emergencies</td>
<td></td>
<td>X RESIDENTS</td>
</tr>
<tr>
<td>Orthopedic emergencies</td>
<td>100%</td>
<td>X INTERNS</td>
</tr>
<tr>
<td>Acute surgical abdomen</td>
<td></td>
<td>X OTHER: Paramedics</td>
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<tr>
<td>Complications of alcoholism</td>
<td></td>
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<tr>
<td>Upper gastrointestinal hemorrhage</td>
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</tbody>
</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 75

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 650

TYPICAL WEEKLY SCHEDULE

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<tr>
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<th>Thursday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Emergency Room Activities</td>
<td>Emergency Room Activities</td>
<td>Emergency Room Activities</td>
<td>Emergency Room Activities</td>
<td>Emergency Room Activities</td>
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<tr>
<td>PM</td>
<td>Noon Teaching Conference</td>
<td>Noon Teaching Conference</td>
<td>Noon Teaching Conference</td>
<td>Noon Teaching Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Five 8-hour shifts each week.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Upon request, a paramedic "ride-along" can be arranged to observe a paramedic team during the course of their day. St. Mary Medical Center, 1050 Linden Avenue, Box 887, Long Beach, CA 90801
EM320.06  EMERGENCY MEDICINE SUBINTERNSHIP

Subinternship Location: KERN  2007-2008  
Revised: 1/11/07

STUDENT EXPERIENCES
CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
FELLOWS
X INTERNS
X RESIDENTS
OTHER:

COMMON PROBLEMS/DISEASES
1. Resp. emergency: asthma, COPD
2. Cardiovasc: AMI, CHF, CPR
3. Blunt and penetrating trauma
4. Pediatric emergencies
5. Toxicology, coma
6. OB/GYN emergencies
7. Abdominal pain
8. Psychiatric emergencies

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 1,125

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: All students will have equal amounts of days, weekends, and evening shifts.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: All patients seen are presented to faculty who are in the ED 24 hours/day. Students function approx. at level of an intern. Housing, travel, and malpractice/health insurance are not provided by KERN. Students may elect to take any 8-hr shift, 24/hrs a day. A student handbook of core reading materials is provided at start of the rotation.
EM350.05 EMERGENCY MEDICINE

Subinternship Location: WVA 2007-2008 Revised: 1/11/07

COURSE CHAIR: Zhaoping Li, M.D. (310) 268-3125 E-MAIL: zhaoping.li@med.va.gov

SUPPORTING FACULTY: Drs. Samuel Burnstein and Paul Schneider

STUDENT COORDINATOR: Christine Seydel (310) 268-3034 E-MAIL: christine.seydel@va.gov

REPORT TO: Zhaoping Li, M.D., Emergency Room Wadsworth VA, Bldg 500

PREREQUISITES: Medicine, Surgery, OB-Gyn, and Psychiatry

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2007-2008 ROTATIONS BEGIN WEEKS: 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

DESCRIPTION: This rotation allows 4th year students to be the patient's initial contact with the Emergency Room at the physician level. There is close supervision by an upper-level resident or full-time staff physician.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Ischemic heart disease/chest pain
2. Acute respiratory distress
3. Altered mental status
4. Infection, sepsis
5. Drug overdoses
6. Abdominal pain
7. Hypertension
8. Complications of diabetes

INPATIENT: 0% OUTPATIENT: 100%
CONSULTATION: 0% PRIMARY CARE: 100%

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: ER Nurses, Nurse Practitioners

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 15 - 20
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 375

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
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<th>Wednesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:15 – 9:00 Morning Report</td>
<td>8:15 – 9:00 Morning Report</td>
<td>10:00 – 12:00 Primary Patient Care</td>
<td>8:15 – 9:00 Morning Report</td>
<td>8:15 – 9:00 Morning Report</td>
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<td>10:00 – 12:00 Primary Patient Care</td>
<td>10:00 – 12:00 Primary Patient Care</td>
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<td>10:00 – 12:00 Primary Patient Care</td>
<td>10:00 – 12:00 Primary Patient Care</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Noon Conference</td>
<td>12:00 – 1:00 Noon Conference</td>
<td>12:00 – 1:00 Noon Conference</td>
<td>12:00 – 1:00 Noon Conference</td>
<td>12:00 – 1:00 Noon Conference</td>
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<td>1:00 – 5:00 Primary Patient Care</td>
<td>Interns Report</td>
<td>Medical Grand Rnds</td>
<td>Journal Club</td>
<td>1:00 – 5:00 Primary Patient Care</td>
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<td>1:00 – 5:00 Primary Patient Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective provides an excellent exposure to acute ambulatory medicine in the setting of an emergency room. The rotation emphasizes student autonomy and responsibility under the watchful eye of a resident and staff physician. The student will be allowed to initiate the first steps in patient stabilization and evaluation prior to hospital admission or further ambulatory management.