ME410.01   CARDIOLOGY

Subinternship/Inpatient  Location: CHS  2008-2009
Revised: 12/6/07

COURSE CHAIR:  PHONE #:
Henry Honda, M.D.  (310) 794-2126

E-MAIL:

SUPPORTING FACULTY:
CCU- Drs. Middlekauff, Tillisch, Goldhaber, Weiss, Honda, Bostrom, Cesario, Watson, MacLellan, AboulHosn, and Cruz

STUDENT COORDINATOR:  PHONE #:
Anna J. Guzman  (310) 794-9736

E-MAIL: AJGuzman@mednet.ucla.edu

REPORT TO: Room 67-134 CHS, 9:00 a.m.

PREREQUISITES: Medicine, Neurology, Psychiatry, Radiology, Surgery, and Obstetrics/Gynecology

AVAILABLE FOR EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
12, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45

DESCRIPTION: Each student will spend three weeks as a sub-intern on the Cardiac Care Unit and will work up and participate in the management of patients under the guidance of the Resident & Attending Physician. Rounds will be made daily, including weekends. The students will be expected to present and discuss their cases and participate in the discussion of other cases. They will also participate in all Cardiology conferences. In most instances, students will be on call with the residents every 3rd night.

COURSE OBJECTIVES (in order of importance)
1. Knowledge of pathogenesis and natural history of cardiovascular disease; the orderly investigation, differential diagnosis, and management of coronary artery disease, valvular heart disease, and cardiomyopathies.
2. Knowledge of the pharmacology of all major classes of cardiac medication.
3. Clinical skills: medical interviewing and physical examination.
4. Medical judgment, analysis of medical data, and synthesis of information.
5. Interpretation of electrocardiograms and skill in interpreting data from Swan-Ganz catheters.
6. Development of an understanding of the principles, costs, and benefits and proper use of routine cardiac tests, such as echocardiograms, treadmill tests, and radionuclide scans.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Myocardial infarction
2. Angina
3. CHF
4. Arrhythmias
5. Valvular heart disease
6. Postoperative cardiac problems
7. Cardiomyopathies

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 7
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: > 70

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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</thead>
<tbody>
<tr>
<td>PM</td>
<td>12:00 – 1:00 Core Curriculum Conference 57-134 CHS</td>
<td>5:00 – 6:00 Cardiac Cath Conference 57-134 CHS</td>
<td>12:00 – 1:00 Diagnostic Techniques Conf. 57-134 CHS</td>
<td>12:00 – 1:00 Clinical Case Conference 57-134 CHS</td>
<td>12:00 – 1:00 Ground Rounds 57-134 CHS</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students will have night call every third night with CCU Resident. CCU Rounds from 8:30 – 10:30 a.m., Saturdays and Sundays.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

196
COURSE CHAIR: Dennis Yick, M.D.  
PHONE #: (818) 364-3205  
E-MAIL:  

SUPPORTING FACULTY:  
Drs. Janet Au, Susan Stein, Dennis Yick, Nader Kamanger, and Gregory Bierer  

STUDENT COORDINATOR: Mark DeVany  
PHONE #: (818) 364-3205  
E-MAIL: mdevany@ladhs.org  

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

COMMON PROBLEMS/DISEASES  
1. GI Bleed  
2. Chest pain  
3. Congestive heart failure  
4. Respiratory failure  
5. Diabetic ketoacidosis  

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4 - 5  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 25  

TYPICAL WEEKLY SCHEDULE  

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call is every third night with MICU team. Students will have at least every sixth day off.  

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  

DESCRIPTION: This elective is in a critical care unit at a county hospital. The unit is a combined MICU and CCU. The student will have direct patient responsibility with a variety of diseases including GI bleed, unstable angina, diabetic ketoacidosis, and respiratory failure.
COURSE CHAIR:  Stephen Lim, M.D.  
PHONE #:  (310) 423-1160  
E-MAIL:  

SUPPORTING FACULTY:  Dr. Michael Lil  

STUDENT COORDINATOR:  Judy Jacobs  
PHONE #:  (310) 423-4658  
FAX:  (310) 423-5200  
E-MAIL: judith.jacobs@cshs.org  

REPORT TO:  Judy Jacobs, Becker Bldg., Becker 116, North Tower, 9:00 a.m.  

PREREQUISITES:  Medicine and Surgery  

AVAILABLE FOR EXterns: Yes  
STUDENTS / PERIOD:  max 1 min 1  
DURATION:  3 weeks  
2008-2009 ROTATIONS BEGIN WEEKS:  
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48  

DESCRIPTION:  Designed for students with an interest in Hematology/Oncology and hematopoietic stem cell transplant.  Students will work-up, admit and manage 3-4 patients per week with various neoplastic diseases.  Typical patients include those with acute leukemia, lymphoma, solid tumors and those undergoing autologous and allogenic stem cell transplants.  Students will be involved in the continuous care of these patients, including management of internal medicine problems as a complication of the disease or its treatment.  Students will review patient data, including laboratory data, bone marrow biopsies and radiographs.  Students will also become knowledgeable in the management of severe anemia, thrombocytopenia and neutropenic fever.  

STUDENT EXPERIENCES  
COMMON PROBLEMS/DISEASES  
1. Leukemia  
2. Lymphoma  
3. Multiple myeloma  
4. Neutropenic fever  
5. Stem cell transplantation  
INPATIENT:  90%  
OUTPATIENT:  10%  
CONSULTATION:  0%  
PRIMARY CARE:  100%  
CLOSE CONTACT WITH:  
X FULL-TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
OTHER:  

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  3  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  10  

TYPICAL WEEKLY SCHEDULE  

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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</thead>
</table>
| AM    | 8:00 – 10:30 Work Rounds | 8:00 – 9:00 Heme. Onc Grand Rounds | 8:00 – 10:30 Work Rounds | 8:00 – 10:30 Work Rounds | 8:00 – 8:30 Work Rounds  
8:30 — 9:30 Grand Rounds |
| PM    | 12:00 – 1:00 Noon Conference  
Work Rounds  
2:00 – 3:00 Heme./Onc. Lectures  | Work Rounds  
2:00 – 3:00 Heme./Onc. Lectures  
3:00 – 5:00 Outpatient Clinic  | 12:00 Heme/Onc Tumor Board  
2:00 – 3:00 Heme./Onc. Lectures  
2:00 – 3:00 Outpatient Clinic  | Work Rounds  
2:00 – 3:00 Heme./Onc. Lectures  | Work Rounds |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every third night call.  
ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME450.01  INTERNAL MEDICINE

Subinternship/Inpatient  Location: CS  2008-2009  Revised: 12/6/07

COURSE CHAIR:  Phone #:  E-MAIL:
Mark Noah, M.D. (310) 423-4658

SUPPORTING FACULTY:
Staff, Department of Medicine, Cedars-Sinai Medical Center

STUDENT COORDINATOR:  Phone #:  Fax:  E-MAIL:
Judy Jacobs (310) 423-4658  (310) 423-5200  judith.jacobs@cshs.org

REPORT TO:  Judy Jacobs, Becker Bldg., Becker 116, North Tower, 9:00 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: Senior medical students will function as one of the primary care givers for a number of patients admitted to the general medicine wards. The students will be a member of a medical team made up of attending physicians, residents, interns and Jr. medical students. The student will be responsible for the admitting evaluations, diagnostic and therapeutic orders and daily progress notes for patients under their care. They will admit between 2 and 4 patients per call day and be directly supervised by an R-2 or R-3 resident and a faculty attending physician.

STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 100%</th>
<th>OUTPATIENT: 0%</th>
<th>CONSULTATION: 0%</th>
<th>PRIMARY CARE: 100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Renal diseases</td>
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<tr>
<td>2. Cerebrovascular disease</td>
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<td>3. Respiratory failure</td>
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<td>4. Diabetes mellitus</td>
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<td>5. Pneumonia</td>
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<td>6. Peptic ulcer disease</td>
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<td>7. Chronic obstructive pulmonary disease</td>
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<td>8. AIDS</td>
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CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNs
OTHER:

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 23

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
<th>Monday</th>
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<td>Patient Care Activities</td>
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<td>Patient Care Activities</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The student will take night call in the hospital every fourth night, working with a house officer. In general, s/he will be assigned patients in rotation with the intern. Weekend night call will occur approximately twice a rotation.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

199
COURSE CHAIR: Darryl Y. Sue, M.D.  
PHONE #: (310) 222-2409  
E-MAIL:  

SUPPORTING FACULTY: Department of Medicine Staff Harbor-UCLA Medical Center  

STUDENT COORDINATOR: Kathleen McGinley  
PHONE #: (310) 222-2409  
E-MAIL: kmcginley@ladhs.org  

REPORT TO: Dept of Medicine Office, 5th Floor Lobby, Harbor-UCLA Medical Center, Torrance, CA 90509-2910, 8:30 am.  

PREREQUISITES: Medicine and Surgery  

AVAILABLE FOR EXTERNALS: Yes  

STUDENTS / PERIOD: max 4 min 0  

DURATION: 3 weeks  

2008-2009 ROTATIONS BEGIN WEEKS: 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48  

DESCRIPTION: Students will assume responsibilities quite similar to those of an intern, although with fewer patients. The student will be a member of a general medicine ward service consisting of an attending physician, residents, interns, and usually one "third year" student. Attending Rounds are made daily.  

STUDENT EXPERIENCES  

COMMON PROBLEMS/DISEASES  

1. Congestive heart failure  
2. Hypertension  
3. Diabetes mellitus  
4. COPD-Chronic bronchitis & emphysema  
5. Cancer  
6. Coronary artery disease  
7. Upper gastrointestinal hemorrhage  
8. Pneumonia, sepsis  

CLOSE CONTACT WITH:  
X FULL-TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER: Nursing care specialists  

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5  

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 40  

TYPICAL WEEKLY SCHEDULE  

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fifth night with admitting team. Schedule overall is that of the ward team.  

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Attendance and participation in various conferences, lectures, and subspecialty rounds are encouraged. If absent more than one week no credit will be given.  

200
ME450.03  INTERNAL MEDICINE

Subinternship/Inpatient  Location: ST.MARY  2008-2009  Revised: 12/13/07

COURSE CHAIR:  Chester Choi, M.D.  PHONE #:  (562) 491-9350
E-MAIL:

SUPPORTING FACULTY:  C. Choi, M.D, J. Criley, M.D., and Staff

STUDENT COORDINATOR:  Sylvia Perez  PHONE #:  (562) 491-9350
E-MAIL:

REPORT TO:  Department of Medical Education, 3 West, 1050 Linden Ave., Long Beach, CA 90813

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERN: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

DESCRIPTION: St. Mary Medical Center is a 400-bed community hospital. Students participate in the diagnostic and therapeutic decisions as a member of the ward team. They are responsible for daily notes and orders. The student will be able to participate in a variety of procedures under supervision and guidance. A number of daily didactic primary care and subspecialty conferences are provided with special emphasis on primary care, women's health, and geriatric medicine. The patient mix includes disease processes typically encountered in a community hospital setting. One unique aspect of the rotation is the opportunity to provide medical consultations to non-medical services (Obstetrics, Surgery, Psychiatry). Teaching and supervision is provided by attending physicians in private practice, full-time medical education faculty and Internal Medicine residents.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Coronary artery disease
2. Congestive Heart Failure
3. Pneumonia
4. Chronic Obstructive Pulmonary Disease
5. Atrial Fibrillation
6. Diabetes Mellitus
7. Cerebrovascular Disease
8. Hepatic Disease

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 8

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 - Morning Report</td>
<td>8:00 - Intern/student Morning Report</td>
<td>8:00 - Morning Report &amp; Radiology Conference</td>
<td>8:00 - Medical Clinic</td>
<td>8:00 - Intern/student Morning Report</td>
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<tr>
<td></td>
<td>9:30 - Work Rounds w/ Residents</td>
<td>9:30 - Work Rounds w/ Residents</td>
<td>9:30 - Work Rounds w/ Residents</td>
<td>9:30 - 12:00 Work Rounds w/ Residents</td>
<td>9:30 - Work Rounds w/Residents</td>
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<td>11:30 - Teaching Attending Rounds</td>
<td>11:30 - Teaching Attending Rounds</td>
<td>11:30 - Teaching Attending Rounds</td>
<td>11:30 - Teaching Attending Rounds</td>
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<tr>
<td></td>
<td>1:30 - New Admissions &amp; Patient Care</td>
<td>1:30 - New Admissions &amp; Patient Care</td>
<td>1:30 - New Admissions &amp; Patient Care</td>
<td>1:30 - New Admissions &amp; Patient Care</td>
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<tr>
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<td>4:00 - Sign-out rounds Patient Care</td>
<td>4:00 - Sign-out rounds Patient Care</td>
<td>4:00 - Sign-out rounds Patient Care</td>
<td>4:00 - Sign-out rounds Patient Care</td>
<td>4:00 - Sign-out rounds Patient Care</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call with house staff every sixth night is optional.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will assume responsibilities of a clinical clerk on a general medicine service. By arrangement, a room within the hospital may be available for the entire month's rotation: St. Mary Medical Center, 1050 Linden Avenue 887, Long Beach, CA 90801.
INPATIENT MEDICINE

Subinternship/Inpatient Location: WVA 2008-2009 Revised: 12/6/07

COURSE CHAIR: Samuel Burstein, MD. PHONE #: (310) 478-3711
E-MAIL:

SUPPORTING FACULTY: Samuel Burstein, M.D.

STUDENT COORDINATOR: Christine Seydel PHONE #: (310) 268-3034
E-MAIL: christine.sydel@med.va.gov

REPORT TO: Dr. Samuel Burstein, Bldg. 500, Rm 3209, 8:30 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 5 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

DESCRIPTION: This is a sub-internship (or acting internship) where students will assume responsibilities similar to that of an intern. The student will become an integral part of the patient care team along with one resident, two interns, one or two medical students, and one full-time dedicated staff physician. The team will manage the acute medical inpatient service.

COMMON PROBLEMS/DISEASES

1. ASHD, angina, CHF, HTN
2. Decompensated liver disease
3. Gastrointestinal bleeding
4. Infection, pneumonia, sepsis
5. DKA, AKA, mixed metabolic disease
6. Obstructive lung disease
7. Neoplasia
8. Altered mental status

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

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Students, Health staff

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4 - 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 13 - 15

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Day</th>
<th>Monday AM</th>
<th>Tuesday AM</th>
<th>Wednesday AM</th>
<th>Thursday AM</th>
<th>Friday AM</th>
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<tbody>
<tr>
<td></td>
<td>7:30 - Ward Rounds</td>
<td>7:30 - Ward Rounds</td>
<td>7:30 - Ward Rounds</td>
<td>7:30 - Ward Rounds</td>
<td>7:30 - Ward Rounds</td>
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<tr>
<td></td>
<td>8:30 - Case Conference</td>
<td>9:00 - Morning Report</td>
<td>9:00 - Morning Report</td>
<td>8:30 - Case Conference</td>
<td>8:30 - Case Conference</td>
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<tr>
<td></td>
<td>10:00 - Attending Rounds</td>
<td>10:00 - Attending Rounds</td>
<td>10:00 - Attending Rounds</td>
<td>10:00 - Attending Rounds</td>
<td>10:00 - Attending Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>Noon Conference</td>
<td>Interns Case Conference</td>
<td>Medical Grand Rounds</td>
<td>Journal Club/Other</td>
<td>Noon Conference</td>
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<tr>
<td></td>
<td>1:00 - Patient Management</td>
<td>1:00 - Patient Management</td>
<td>1:00 - Patient Management</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students will take call with their team every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective provides excellent preparation for a medical or surgical internship and lays the groundwork for other medical specialties. The rotation emphasizes student autonomy and responsibility under the watchful eyes of a resident and staff physician. The student will be the primary physician for the patients they work-up and follow. The student will be expected to attend the noon-day conferences and present cases on attending rounds.

202
ME450.05 INTERNAL MEDICINE

Advanced Clinical Clerkship
Location: KDMC
2008-2009
Revised: 8/18/08

COURSE CHAIR:
Peter Chee, M.D.
E-MAIL: (323) 783-3810

SUPPORTING FACULTY:
The staff of the Department of Internal Medicine

STUDENT COORDINATOR:
Alicia Summerlin
PHONE #: (323) 783-4516
E-MAIL: alicia.r.summerlin@kp.org

REPORT TO: Alicia Summerlin, Clerkship Coordinator. 8 AM.
Center for Medical Education, 4733 Sunset Blvd., 3rd Floor.
Validated parking next door at 4715 Sunset Blvd

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNALS: Yes
STUDENTS / PERIOD: max 2 min 1
DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: Los Angeles Kaiser Permanente Medical Center is the tertiary care medical center for Kaiser Permanente, the largest Health Maintenance Organization in Southern California. The student will function as a subintern on the medicine service composed of the attending, resident, and 2 interns.

STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 100%</th>
<th>CLOSE CONTACT WITH:</th>
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</thead>
<tbody>
<tr>
<td>Coronary artery disease/CHF</td>
<td></td>
<td>X FULL-TIME FACULTY</td>
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<td>COPD and asthma</td>
<td></td>
<td>X CLINICAL FACULTY</td>
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<tr>
<td>Pneumonia</td>
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<td>X FELLOWS</td>
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<tr>
<td>Sepsis</td>
<td></td>
<td>X RESIDENTS</td>
</tr>
<tr>
<td>GI bleeding</td>
<td></td>
<td>X INTERNS</td>
</tr>
<tr>
<td>Cerebrovascular disease</td>
<td></td>
<td>OTHER:</td>
</tr>
<tr>
<td>Renal failure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AIDS</td>
<td></td>
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</tr>
</tbody>
</table>

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 15

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>8:00 - Work Rounds</td>
<td>8:00 - Work Rounds</td>
<td>8:00 - Work Rounds</td>
<td>8:00 - Work Rounds</td>
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<td>9:00 - Attending Rounds</td>
<td>9:00 - Attending Rounds</td>
<td>9:00 - Attending Rounds</td>
<td>9:00 - Attending Rounds</td>
<td>9:00 - Attending Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>12:30 - Hematology/Renal Conference</td>
<td>2:00 - Internal Medicine Education Conference (Grand Rounds) 3 Hrs.</td>
<td>12:30 - Cardio Conf</td>
<td>12:30 - Id/Onc Conf.</td>
<td>12:30 - GI Conf.</td>
</tr>
<tr>
<td></td>
<td>1:30 - Patient Care</td>
<td>3:00 - Patient Care</td>
<td>1:30 - EKG Conference</td>
<td>3:00 - Patient Care</td>
<td>3:00 - Patient Care</td>
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<td>3:00 - Patient Care</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Short call and weekends

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The rotation provides an opportunity to practice medicine in a large, successful health maintenance organization which cares for over 2.1 million patients.
### COURSE CHAIR:
Soma Wali, M.D.  
PHONE #: (818) 364-3205  
E-MAIL:  

### SUPPORTING FACULTY:
Faculty of the Department of Medicine at Olive View  

### COURSE OBJECTIVES (in order of importance)
1. Knowledge of pathogenesis, natural history, differential diagnosis and management of various diseases including diabetes mellitus, pneumonia, COPD, congestive heart failure, GI bleeding, coronary artery disease, endocarditis, etc.
3. Experience in primary patient responsibility, acting as a subintern.
4. Ability to read and interpret chest x-rays; read EKGs.
5. Techniques or procedures such as lumbar punctures, thoracentesis, paracentesis, central lines.
6. Improved history, physical exam, and presentation.
7. Improving the doctor-patient team.
8. Team approach and utilization of allied health personnel.

### PREREQUISITES:
Medicine and Surgery

### AVAILABLE FOR EXTERNS:
Yes

### STUDENTS / PERIOD:
max 4  min 1

### DURATION:
3 weeks

### 2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

### DESCRIPTION:
The General Internal Medicine rotation is a three-week rotation. During this time the student will be functioning at the level of a subintern, taking admissions independent of the interns on the team. As a subintern, the student will work directly under the supervision of the senior resident and attending on service. During this time, the student will learn about pathology and will work with a very diverse patient population. The teaching is outstanding at our facility. The student's responsibilities will be similar to that of that of the interns on the team, but the student will carry fewer patients than the interns. The subintern will also get to work with third-year students and have an opportunity to teach. The overall experience is rated very high.

### COMMON PROBLEMS/DISEASES
1. Pneumonia
2. Tuberculosis
3. GI bleeding
4. Asthma
5. Congestive heart failure
6. Cancer
7. Diabetes
8. HIV-related illnesses

### APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:
4 - 5

### TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:
63

### TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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<th>Friday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>7:00 – 8:00: Preround</td>
<td>7:00 – 8:00: Preround</td>
<td>7:00 – 8:00: Preround</td>
<td>7:00 – 8:00: Preround</td>
<td>7:00 – 8:00: Preround</td>
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<td>8:00 – 9:00: Resident Rounds</td>
<td>8:00 – 9:00: Resident Rounds</td>
<td>8:00 – 9:00: Resident Rounds</td>
<td>8:00 – 9:00: Resident Rounds</td>
<td>8:00 – 9:00: Resident Rounds</td>
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<tr>
<td></td>
<td>9:00 – 10:00: Morning Report</td>
<td>9:00 – 10:00: Morning Report</td>
<td>9:00 – 10:00: Morning Report</td>
<td>9:00 – 10:00: Morning Report</td>
<td>9:00 – 10:00: Morning Report</td>
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<td>10:00-12:00: Attending Rounds</td>
<td>10:00-12:00: Attending Rounds</td>
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<td>10:00-12:00: Attending Rounds</td>
<td>10:00-12:00: Attending Rounds</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>
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<td>1:00 – 5:00 Patient Care</td>
<td>1:00 – 5:00 Patient Care</td>
<td>1:00 – 5:00 Patient Care</td>
<td>1:00 – 5:00 Patient Care</td>
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</table>

### ON-CALL SCHEDULE & WEEKEND ACTIVITIES:
Every fourth night.

### ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Subinterns have primary responsibility for patient care, with close supervision by members of the ward team.
### COURSE OBJECTIVES (in order of importance)
1. Advanced knowledge of general medical disease processes or problems (e.g., infections, anemia, metabolic disorders, heart failure, and cancer).
2. Improved history-taking and physical examination.
3. Improved clinical skills, including medical judgment and analysis of medical data and synthesis of information.
4. Diagnosis and therapeutic management of acutely ill patients and/or complex medical problems (e.g., sepsis, electrolyte problems, and FUO).
5. Improving the doctor-patient relationship and medical-ethical issues of practice.
6. Interpretation of laboratory tests (e.g., electrolytes, liver function tests, blood gases, EKGs, pulmonary function tests).
7. Basic science foundation of pathophysiologic mechanisms of disease.
8. Integral role of participation in whole health care team.
9. Clinical decision-making a changing health care delivery system.
10. Improved proficiency in common medical procedures.

### STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cancer</td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>2. Heart Disease</td>
<td></td>
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<tr>
<td>3. Pulmonary Disease</td>
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<tr>
<td>4. Infections</td>
<td></td>
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<tr>
<td>5. G.I. Bleeding</td>
<td></td>
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<tr>
<td>6. Liver Disease</td>
<td></td>
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<tr>
<td>7. Hypertension &amp; Diabetes</td>
<td></td>
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<td>8. Altered Mental Status</td>
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</tbody>
</table>

### CALL SCHEDULE & WEEKEND ACTIVITIES
- **Morning Report**: 7:30 – 8:30
- **Prerounds**: 8:30 – 9:30
- **Resident Work Rds**: 9:30 – 10:30
- **Morning Rounds**: 10:00 – 12:00
- **Attending Rds**: 12:00 – 1:00

### TYPICAL WEEKLY SCHEDULE

#### AM
- **Monday**: 7:30 – 8:30: Prerounds
- **Tuesday**: 7:30 – 8:30: Prerounds
- **Wednesday**: 7:30 – 8:30: Prerounds
- **Thursday**: 7:30 – 8:30: Prerounds
- **Friday**: 7:30 – 8:30: Prerounds
- **Morning Report**: 8:30 – 9:30
- **Resident Work Rds**: 9:30 – 10:30
- **Morning Rounds**: 10:00 – 12:00
- **Discharge Planning Rounds**: 11:15 – 12:00
- **Attending Rds**: 12:00 – 1:00
- **Nursing & Hospital Ancillary**: 12:00 – 1:00

#### PM
- **Monday**: 12:00 – 1:00
- **Tuesday**: 12:00 – 1:00
- **Wednesday**: 12:00 – 1:00
- **Thursday**: 12:00 – 1:00
- **Friday**: 12:00 – 1:00
- **GIM Noon Conf.**: 12:00 – 1:00
- **Patient Care**: 1:00

### ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS
- **Other**: The Sub I will take call with the team every fifth night. Weekend call is incorporated into the call schedule as are days off. All will comply with the UCLA and ACGME work hours guidelines.
- **Instruction**: Though not assigned to clinic, subinterns are strongly encouraged to follow up on their patients in the Internal Medicine suite with the patients' continuity of care provider.
MEDICAL INTENSIVE CARE UNIT (MICU)

Subinternship/Inpatient
Location: CHS
2008-2009
Revised: 11/29/07

STUDENT EXPERIENCES

CLOSE CONTACT WITH:
1. FULL-TIME FACULTY
2. CLINICAL FACULTY
3. FELLOWS
4. RESIDENTS
5. INTERNS
6. OTHER: Nurses, Respiratory Therapists, Radiologists

COMMON PROBLEMS/DISEASES
1. Respiratory failure (COPD, ARDS)
2. Shock (cardiogenic, hemorrhagic, septic)
3. Drug overdose
4. Renal failure
5. Immuno-compromised patients
6. Multiorgan system dysfunction
7. Mechanical ventilation
8. Hepatic failure

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth day and night along with medical resident. Saturday and Sunday: Attending rounds from 8:00 – 11:00 a.m.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Sleeping quarters are available in the MICU. Although usually a busy rotation, the patient load may be variable at times; weeks #17-19 may be relatively "slow." To achieve further clinical competence in pulmonary medicine, see Appendix II of The UCLA Pulmonary Curriculum: An Overview and a Respiratory Care Curriculum (Biomedical Library catalogue numbers: WF 18, 6588u, 1981). * Optional.
MEDICAL INTENSIVE CARE UNIT (MICU)

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

1. Knowledge of the pathophysiology, differential diagnosis, and medical management of critical illnesses.
2. Clinical skills: medical interviewing, physical examination, and integration of data obtained from invasive hemodynamic and respiratory monitoring.
3. Medical decision making: analysis of medical risk benefit ratios and understanding of ethical and legal issues.
4. Diagnosis and management of complex in-patient problems, including pre- and post-operative surgical care.
5. Oral presentations of clinical cases.
6. Knowledge of pharmacology of cardioactive drugs, bronchodilator therapy, parenteral nutrition, and antibiotics.
7. Familiarity with hemodynamic monitoring equipment, mechanical ventilators, and dialysis devices.
8. Basic science and pathophysiology of critical illness.

COMMON PROBLEMS/DISEASES

1. Acute myocardial infarction & failure
2. Septic shock
3. GI hemorrhage
4. Complicated respiratory failure
5. CNS catastrophes
6. Drug intoxications
7. Acute renal failure
8. Acid-based and electrolyte imbalance

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3 - 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 25

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students on this elective will be on call every third night and will participate during weekend rounds.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Each student will be assigned to a team consisting of a resident and an intern on-call every third night. The students will be under the supervision of full-time attendings and private physicians. Daily work rounds are held with the attending physician and fellow in critical care medicine. Numerous subspecialty consultants from the private and full-time attending staff are available. In addition, formal didactic conferences will be given four times weekly.
RESPIRATORY INTENSIVE CARE

Subinternship/Inpatient  Location: CS  2008-2009  Revised: 12/6/07

COURSE CHAIR: Michael Lewis, M.D.  PHONE #: (310) 423-1835
E-MAIL:

SUPPORTING FACULTY: Zab Mohsenifar, M.D., David Baffle, M.D., Mo Biring, M.D., George Chaux, M.D.

STUDENT COORDINATOR: Judy Jacobs  PHONE #: (310) 423-4658
FAX: (310) 423-5200  E-MAIL: judith.jacobs@cshs.org

REPORT TO: Judy Jacobs, Becker Bldg., Becker 116, North Tower, 9:00 a.m.

PREREQUISITES: Medicine and Surgery entire 3rd year core clerkship

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: This rotation provides an excellent environment to learn principles of management and appropriate work-up of critically ill patients with pulmonary disorders, many of whom have multisystem dysfunction. A core curriculum covering pulmonary/critical care topics as well as ventilator practicals are provided. Subinterns are under the supervision of pulmonary fellow and senior resident. The objective of the 3-week elective is to familiarize students with the investigation and treatment of acute and chronic respiratory diseases requiring intensive care. The 9-bed RICU is managed by 2 housestaff teams (1 resident & 1 intern per team) on an every fourth night rotation.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Chronic obstructive pulmonary disease
2. Asthma
3. Acute respiratory failure
4. ARDS
5. Pneumonia
6. Pulmonary embolism
7. Neuromuscular ventilatory failure
8. Bronchogenic carcinoma

INPATIENT: 100%
OUTPATIENT: 0%
CONSULTATION: 0%
PRIMARY CARE: 100%
CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Allied Health Personnel

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 15

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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<th>Thursday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>9:30 – 12:00 RICU Teaching Rounds</td>
<td>9:30 – 11:00 RICU Teaching Rounds</td>
<td>8:00 – 9:00 Pulmonary Grand Rounds</td>
<td>9:30 – 11:00 RICU Teaching Rounds</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
</tr>
<tr>
<td></td>
<td>11:00 – 12:00 RICU Core Curriculum</td>
<td>9:30 – 12:00 RICU Teaching Rounds</td>
<td>11:00 – 12:00 RICU Core Curriculum</td>
<td>9:30 – 11:00 RICU Teaching Rounds</td>
<td>9:30 – 12:00 RICU Teaching Rounds</td>
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<tr>
<td>PM</td>
<td>4:30 – 5:00 Sign-out Rounds</td>
<td>4:30 – 5:00 Sign-out Rounds</td>
<td>4:30 – 5:00 Sign-out Rounds</td>
<td>4:30 – 5:00 Sign-out Rounds</td>
<td>12:00 – 1:00 Critical Care Conference</td>
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<td>4:30 – 5:00 Sign-out Rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every third day and night. Saturday and Sunday rounds 8:00 – 10:00 a.m.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: A pulmonary fellow is available at all times. Daily rounds with one of the faculty, informal sessions with RICU pulmonary fellows, and scheduled conferences should expose students to an extensive review of pulmonary diseases and applied respiratory physiology.
CARDIAC INTENSIVE CARE UNIT

Subinternship/Inpatient

Location: CS

2008-2009

Revised: 12/6/07

COURSE CHAIR: Bojan Cercek, M.D.

PHONE #: (310) 423-4876

E-MAIL:

SUPPORTING FACULTY:
Attending and Full-time Staff Division of Cardiology

STUDENT COORDINATOR: Judy Jacobs

PHONE #: (310) 423-4658

FAX: (310) 423-5200

E-MAIL: judith.jacobs@cshs.org

REPORT TO: Judy Jacobs, Becker Bldg., Becker 116, North Tower, 9:00 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: Resident/intern teams are on call every third night; subinterns every 6th night. Team of 1 resident, 1 intern, and 1 student usually admit anywhere from 2 - 4 patients. Cardiology fellow is present 24 hrs/day in the unit. The students assume responsibility for work-up of patients and preparation of the plan of treatment, and are encouraged to participate in the procedures (under proper supervision). Teams round daily every morning with the full-time attending. Students are expected to present their patients, and examine them with the attending and discuss the plan of action. During on call team rounds (afternoon) with the cardiology fellow and full-time attending, patients are presented in a briefer form to the team on call for proper continuation of care. Every other morning after rounds, there are lectures, medical teaching conference, or EKG Lecture organized specifically for the rotating students. Post call team leaves by 12 noon, non-on call team leaves by 3:30 p.m.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Acute myocardial infarction
2. Congestive heart failure
3. Acute pulmonary edema
4. Hypotension and shock
5. Cardiac arrhythmias
6. Valvular heart disease
7. Unstable angina
8. Cardiomyopathy

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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<tbody>
<tr>
<td>AM</td>
<td>7:30: Clinical pre-rounds with postcall team, fellow/resident/intern</td>
<td>7:30: Clinical pre-rounds with postcall team, fellow/resident/intern</td>
<td>7:30: Clinical pre-rounds with postcall team, fellow/resident/intern</td>
<td>7:30: Clinical pre-rounds with postcall team, fellow/resident/intern</td>
<td>7:30: Clinical pre-rounds with postcall team, fellow/resident/intern</td>
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<tr>
<td></td>
<td>8:00-11:30: Rds w/attending, bedside rds. Review of studies.</td>
<td>8:00-11:30: Rds w/attending, bedside rds. Review of studies.</td>
<td>8:00-11:30: Rds w/attending, bedside rds. Review of studies.</td>
<td>8:00-11:30: Rds w/attending, bedside rds. Review of studies.</td>
<td>8:00-11:30: Rds w/attending, bedside rds. Review of studies.</td>
</tr>
<tr>
<td>PM</td>
<td>12:00-1:30: EKG course or Noon Medicine Conf. 2:00-3:00: Follow-up of patients</td>
<td>11:00-12:00: CICU Lecture</td>
<td>12:00-1:30: EKG course or Noon Medicine Conf. 2:00-3:00: Follow-up of patients</td>
<td>12:00-1:30: EKG course or Noon Medicine Conf. 2:00-3:00: Follow-up of patients</td>
<td>12:00-1:30: EKG course or Noon Medicine Conf. 2:00-3:00: Follow-up of patients</td>
</tr>
<tr>
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<td>3:00-4:00: Sign-out rds with fellow/attending</td>
<td>3:00-4:00: Sign-out rds with fellow/attending</td>
<td>3:00-4:00: Sign-out rds with fellow/attending</td>
<td>3:00-4:00: Sign-out rds with fellow/attending</td>
<td>3:00-4:00: Sign-out rds with fellow/attending</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One night in six, including weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME455.05  MEDICAL/PULMONARY INTENSIVE CARE

Subinternship/Inpatient  Location: WVA  2008-2009  Revised: 12/16/08

COURSE CHAIR:  Guy Soohoo, M.D.
PHONE #:  (310) 268-3021
E-MAIL:  

SUPPORTING FACULTY:  
Drs. Raj Batra, Steve Dubinett, Silverio Santiago, and Michelle Zeidler

STUDENT COORDINATOR:  Nicole Wright
PHONE #:  (310) 268-3021
E-MAIL: Nicole.wright@va.gov

REPORT TO:  Guy Soohoo, M.D., Bldg. 500, Room 3013 @ 8:15 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD:  max 4 min 1

DURATION:  3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION:  This is a sub-internship (or acting internship) where students will assume responsibilities similar to that of an intern. The student will become an integral part of the critical care team along with one resident, one fellow, and an attending. This is an excellent exposure to critical care medicine and multi-system disease emphasizing student autonomy and responsibility.

COURSE OBJECTIVES (in order of importance)
2. Diagnosis and management of cardiac disease, pulmonary disease, infectious disease, gastrointestinal disease, renal disease, and metabolic disturbances, either singly or in a multisystem fashion.
3. Indications and utilization of mechanical ventilation
4. Indications, applications, and utilization of invasive monitoring, including pulmonary-artery catheterization.
5. Arterial blood gas analysis and interpretation of mixed metabolic disturbances.
6. Understanding the rational use of pressors, inotropes, antibiotics, anti-arrhythmics, oxygen, steroids, etc., in the critically ill patient.
7. Appreciation of the team approach to the critically ill patient.

STUDENT EXPERIENCES

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

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER:  Critical care nurses

COMMON PROBLEMS/DISEASES
1. Infection and septic shock
2. Respiratory failure
3. Decompensated liver disease
4. Gastrointestinal bleeding
5. Multiple metabolic disturbances
6. Malignant hypertension
7. Congestive heart failure
8. Ischemic heart disease

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  28

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00</td>
<td>8:00 - Unit Rounds</td>
<td>8:00 - Unit Rounds</td>
<td>8:00 - Unit Rounds</td>
<td>8:00 - Unit Rounds</td>
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<tr>
<td></td>
<td>8:30 Attending Rds</td>
<td>8:30 Attending Rounds</td>
<td>9:00 – 9:30 X-Ray Rounds</td>
<td>8:30 - Attending Rds</td>
<td>8:30 - Attending Rds</td>
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<td></td>
<td>9:00 – 9:30 X-Ray Rounds</td>
<td>11:30 - ICU Lecture</td>
<td>9:30 - Attending Rounds</td>
<td>9:00 – 9:30 X-Ray Rounds</td>
<td>11:30 - ICU Lecture</td>
</tr>
<tr>
<td>PM</td>
<td>Noon Conference</td>
<td>Intern Case Conf.</td>
<td>Medical Grand Rnds</td>
<td>Noon Conference</td>
<td>Noon Conference</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Call is every fourth night. Saturday and Sunday rounds from 8:30 – 12:00.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  This elective provides excellent preparation for a medical or surgical internship and lays the groundwork for other specialties, e.g., anesthesia. The rotation emphasizes student autonomy and responsibility under the watchful eye of a resident, pulmonary fellow, and staff physician. The student will be the primary physician for the patients they work up and follow.

210
COURSE CHAIR: Bramah Singh, M.D.  
PHONE #: (310) 268-3646  
E-MAIL:  

SUPPORTING FACULTY:  
Drs. Bersohn, Ebrahimi, Feliciana, Mody, Rubin, Singh, Taggart, Warner, and Shapiro  

STUDENT COORDINATOR: Shayne West  
PHONE #: (310) 478-3711  
E-MAIL: Shayne.west@va.gov  

REPORT TO: West Los Angeles VAMC, Bldg. #500, 4 South, Room 4425.  

PREREQUISITES: Medicine and Surgery  
AVAILABLE FOR EXTERNS: Yes  
STUDENTS / PERIOD: max 2 min 1  
DURATION: 3 weeks  

2008-2009 ROTATIONS BEGIN WEEKS:  
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 42, 45, 48  

DESCRIPTION: This course is designed to improve patient management skills of patients admitted for acute cardiac problems. Improvement in cardiac clinical skills of history and physical exam should be achieved. Increased proficiency in EKG interpretation will be obtained.  

COURSE OBJECTIVES (in order of importance)  
1. To provide an opportunity for the student to learn how to perform a proper history and physical examination on patients with cardiac disease.  
2. To teach the student how to interpret an electrocardiogram.  
3. To provide the student with the fundamentals of diagnosing and managing cardiac arrhythmias.  
4. To teach the student how to diagnose and manage urgent cardiac situations such as acute myocardial infarction, pulmonary edema, cardiogenic shock, pericardial tamponade, cardiac conduction defects, and other life-threatening cardiac conditions.  
5. To teach the student the basics of drug treatment for acute cardiac conditions, including pharmacokinetics, indications and contraindications, toxicity and side-effects of certain medications used in the therapy of heart disease.  
6. To teach an appreciation for tests used in diagnosis and treatment in the CCU, such as cardiac enzymes, arterial blood gases, chest x-rays, echocardiograms, cardiac catheterization and temporary pacemakers.  
7. To teach the student the basics of cardiopulmonary resuscitation (CPR).  

STUDENT EXPERIENCES  
COMMON PROBLEMS/DISEASES  
1. Coronary artery disease  
2. Acute coronary syndromes/acute MI  
3. Pulmonary edema/congestive heart failure  
4. Cardiac arrhythmias  
   - Valvular heart disease  
   - Acute pericarditis/pericardial tamponade  

INPATIENT: 100%  
OUTPATIENT: 0%  
CONSULTATION: 0%  
PRIMARY CARE: 100%  
CLOSE CONTACT WITH:  
X FULL-TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER: Nurses/technicians  

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 50  

TYPICAL WEEKLY SCHEDULE  

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<tr>
<td>AM</td>
<td>7:45 Work Rounds</td>
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<td>9:00 CCU Rounds</td>
<td>9:00 CCU Rounds</td>
<td>8:00 Fellow Core Curriculum</td>
<td>9:00 CCU Rounds</td>
<td>9:00 CCU Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 Journal Club Patient Management</td>
<td>Patient Management</td>
<td>12:00 Medical Grand Rounds Patient Management</td>
<td>Patient Management</td>
<td>12:00 EKG/Echo/Hemodynamic Conference Patient Management</td>
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<td></td>
<td>2:00 Nuclear Cardiology Reading</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth night. This includes weekends when call occurs on a weekend evening. Students are expected to attend weekend CCU rounds if they have patients in the unit.  

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective will help the student gain a comprehensive appreciation of the complexities of cardiology as well as an introduction to the instruments used in invasive and non-invasive evaluation of the entire spectrum of cardiac disease. The student should be comfortable with EKG interpretation by the end of the rotation.
ME455.07  MEDICAL INTENSIVE CARE UNIT (MICU)

Subinternship/Inpatient  Location: KAISER.SUN  2008-2009  Revised: 12/2/08

COURSE CHAIR: Dr. Mihran Garabedian  PHONE #: (323) 783-4516  E-MAIL:

SUPPORTING FACULTY: Critical Care/Pulmonary Medicine Faculty

STUDENT COORDINATOR: Alicia Summerlin  PHONE #: (323) 783-4516  E-MAIL: alicia.r.summerlin@kp.org

REPORT TO: Alicia Summerlin, Clerkship Coordinator. 8 AM. Center for Medical Education, 4733 Sunset Blvd., 3rd Floor. Validated parking next door at 4715 Sunset Blvd

PREREQUISITES: Inpatient Internal Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 42, 45, 48

DESCRIPTION: Los Angeles Kaiser Permanente Medical Center is the tertiary care teaching hospital for Kaiser. The MICU is a busy 27 bed unit, which is separate from our 32 bed CCU. Students will function as subinterns and will learn to manage critically ill patients.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  INPATIENT: 100%  CLOSE CONTACT WITH:
1. Respiratory failure  OUTPATIENT: 0%  X FULL-TIME FACULTY
2. Cerebrovascular accidents  CONSULTATION: 0%  X CLINICAL FACULTY
3. GI hemorrhage  PRIMARY CARE: 100%  X FELLOWS
4. Drug overdoses  OTHER:
5. Sepsis  X RESIDENTS
6. Multi-organ failure  X INTERNS
7. Mechanical ventilation
8. Cardiovascular problems

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 16

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 320

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 - 10:00 Work Rounds</td>
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<td>10:00 - 12:00 Attending Rounds</td>
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<td>10:00 - 12:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>1:00 - 3:00 Work Rounds 3:00 - 4:00 Didactic session 4:00 - 5:00 Work rounds/sign-out rounds</td>
<td>1:00 - 5:00 Work Rounds/Sign-Out Rounds</td>
<td>1:30-3:00 Work Rds (Pulmonary, MICU, Thoracic Surgery) 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rds/Sign-out Rounds</td>
<td>1:00 - 5:00 Work Rounds/Sign-Out Rounds</td>
<td>1:00 - 3:00 Work Rounds 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rounds/Sign-Out Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No overnight call duties. 1 day (8:00 a.m. - 12:00 p.m.) of rounds per weekend on average during the rotation.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR:  Shawkat Dhanani, M.D.  
PHONE #:  (310) 268-3036  
E-MAIL:  

SUPPORTING FACULTY:  
M. Cantrell, S. Dhanani, M. Fang, T. Hahn, D. Norman &  
D. Yamaguchi and J. Chodash  

STUDENT COORDINATOR:  
Donna Henriques  
PHONE #:  (310) 268-3474  
E-MAIL: susan.orrange@va.gov  

REPORT TO:  Bldg. 500, Room 2247 (2 East B), 8:00 a.m. on 
first day.  

PREREQUISITES:  Medicine, Surgery, Neurology, Psychiatry, 
Radiology  

AVAILABLE FOR EXTERNS:  Yes  

STUDENTS / PERIOD:  max 2 min 1  

DURATION:  3 weeks  

2008-2009 ROTATIONS BEGIN WEEKS:  
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48  

DESCRIPTION:  This is one of the electives of the Multicampus Division of Geriatric Medicine, which encompasses programs at the 
VAMC West Los Angeles (Wadsworth), VAMC Sepulveda, and the UCLA Medical Center. All students, regardless of primary site, will 
participate in the following multicampus educational activities: Weekly Tuesday Clinical Conference, Research Seminar, and Journal 
Club.  

STUDENT EXPERIENCES  

COMMON PROBLEMS/DISEASES  
1. Arterioslerotic heart disease  
2. Dementia  
3. Incontinence  
4. Stroke/rehabilitation  
5. Infections  
6. Sensory impairment  
7. Falls  
8. Failure to thrive  

INPATIENT:  80%  
OUTPATIENT:  20%  
CONSULTATION:  Available  
PRIMARY CARE:  100%  

CLOSE CONTACT WITH:  
X FULL-TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER: Nurses, pharmacy, social 
work, audiology, optometry  

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  1 - 2  

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  5 - 6  

TYPICAL WEEKLY SCHEDULE  

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<td>Faculty Teaching Rounds</td>
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<td></td>
<td>Medical Service M &amp; M Conference</td>
<td>Multicampus Division Clinical Lecture</td>
<td>Medical Service Grand Rounds</td>
<td>Patient Workups</td>
<td>Medical Service Lecture</td>
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<td>2:00</td>
<td>4:00</td>
<td>4:00</td>
<td>Patient Workups</td>
<td>Patient Workups</td>
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<tr>
<td></td>
<td>Team Meeting</td>
<td>Research Seminar/Journal Club</td>
<td>Patient Workups</td>
<td>Family Meetings</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  No night calls. See assigned patients on weekends.  

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will have the opportunity to learn about problems associ-
ated with aging through hands-on care under careful clinical supervision with supplemental learning, formal didactic conferences and 
seminars. Additionally, students will participate and experience the multidisciplinary approach to delivering health care.
ME470.01    MEDICAL RESPIRATORY ICU

Subinternship/Inpatient    Location: HARBOR    2008-2009
Revised: 12/6/07

COURSE CHAIR:  Darryl Y. Sue, M.D.    PHONE #: (310) 222-2409
E-MAIL: 

SUPPORTING FACULTY:  Drs. Gregory Mason, Kathy Sietsema, William Stringer, Richard Casaburi and Janine Vintch

STUDENT COORDINATOR:  Kathleen McGinley    PHONE #: (310) 222-2409
E-MAIL: kmcginley@ladhs.org

REPORT TO:  5E-ICU at 7:30 a.m. on first day of elective.

PREREQUISITES:  Medicine and Surgery

AVAILABLE FOR EXTERNS:  Yes

STUDENTS / PERIOD:  max 2 min 0

DURATION:  3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION:  The student shares responsibility with an intern for 24-hour coverage of an eight bed medical intensive care unit. Teaching activities include daily rounds with ward teams, respiratory fellow, and attending physician. Patients are acutely ill, often with multiple system failure, although they primarily have respiratory diseases.

COURSE OBJECTIVES (in order of importance)
1. Diagnosis and management of complex inpatient problems such as acute respiratory failure, renal failure electrolyte disorders, GI bleeding, and sepsis.
3. Interpretations of arterial blood gases, electrolytes, EKG, chest x-rays, and hemodynamic data.
4. Indications and use of pulmonary artery catheters, mechanical ventilators, and monitoring systems.
5. Medical judgment, analysis of medical data, and synthesis of information.
6. Knowledge of bronchodilators, vasoactive drugs, and antibiotics.
7. Consideration of cost effective approach to intensive care.
8. Consideration of ethical issues in life-support and other decisions.

COMMON PROBLEMS/DISEASES
1. Acute respiratory failure
2. GI bleeding
3. Shock
4. Sepsis
5. Hepatic failure
6. Acute renal failure
7. Electrolyte imbalance
8. Coma

STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 100%</th>
<th>OUTPATIENT: 0%</th>
<th>CONSULTATION: 0%</th>
<th>PRIMARY CARE: 100%</th>
</tr>
</thead>
</table>

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 14

TYPICAL WEEKLY SCHEDULE

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<td>Attending Rounds</td>
<td>Medical Grand Rounds</td>
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<td>PM</td>
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<td>Work Rounds</td>
<td>Work Rounds</td>
<td>Medical M&amp;M Conference</td>
<td>Work Rounds</td>
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<td>Medicine Lecture</td>
<td>Work Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: 24 hours on /24 hours off for 2-3 shifts/week; work alongside ICU intern. Sundays off.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: ICU work is intense, but rewarding. Educational impact of spending 24 hours with critically ill patient is enormous.
PULMONARY DISEASES

Subinternship/Inpatient Location: WVA 2008-2009 Revised: 11/25/08

COURSE CHAIR: Silverio Santiago, M.D. PHONE #: (310) 268-3021
E-MAIL:

SUPPORTING FACULTY: Drs. Raj Batra, Steven Dubinett, Ami Oren, Guy Soo Hoo and Michael Littner

STUDENT COORDINATOR: Nicole Wright PHONE #: (310) 268-3021 E-MAIL: Nicole.wright@va.gov

REPORT TO: S. Santiago, M.D., Bldg. 500, VA Med Center, Room 3013, 8:00 am.

PREREQUISITES: Internal Inpatient Medicine and Surgery

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIn WEEkS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: Students will be responsible for the evaluation and continued care of a number of patients with respiratory diseases. They will be under the direct supervision of a pulmonary fellow and will attend daily rounds.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute respiratory failure
2. Lung carcinoma/pulmonary nodule
3. Pneumonias
4. Obstructive airways disease
5. Interstitial lung disease
6. Pleural effusion
7. Pre- and post-operative evaluations
8. Tuberculosis

INPATIENT: 90%
OUTPATIENT: 10%
CONSULTATION: 100%
PRIMARY CARE: 0%

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X FELLOWS
X RESIDENTS
OTHER:

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Consults</td>
<td>Consults</td>
<td>8:00 Pulmonary Conf. Consults/Rounds</td>
<td>Consults/Rounds</td>
<td>Consults</td>
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<tr>
<td>PM</td>
<td>Consult Rounds</td>
<td>12:00 Pulmonary Conference Consult Rounds</td>
<td>Medical Grand Rounds 1:00 - 4:00 Sleep Disorders Clinic</td>
<td>1:00 - 4:00 Chest Clinic 5:00 Pulmonary Conference</td>
<td>12:00 Pulmonary Conference Consult Rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
PREREQUISITES: Medicine, Radiology, and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: This elective offers the opportunity to learn the diagnosis and care of patients with various lung diseases, including COPD, lung cancer, interstitial disease, sarcoidosis, and pulmonary embolus. In addition, there is exposure to care of patients with respiratory failure in the I.C.U. The student will do initial consultative work ups with presentations to the Pulmonary Fellow, Attending M.D., and the Course Chairman, and will also see patients in the Monday AM Chest Clinic.

COMMON PROBLEMS/DISEASES
1. Lung cancer
2. Asthma
3. COPD
4. Pneumonia
5. Tuberculosis
6. Interstitial disease
7. ARDS

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 - 12:00 p.m. or Consult Rounds</td>
<td>9:00 - 12:00 p.m. Attending Rounds</td>
<td>9:00 - 12:00 p.m. Attending Rounds</td>
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<td>Chest Clinic</td>
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<tr>
<td>PM</td>
<td>1:00 - 4:00 Pulmonary Attending Rounds</td>
<td>2:30 – 4:30 Medical Chest Conference</td>
<td>Procedures/ Bronchoscopies</td>
<td>Bronchoscopies/ Procedures</td>
<td>Pulmonary Function Tests</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
PULMONARY DISEASE AT BARLOW RESPIRATORY HOSPITAL

Subinternship/Inpatient
Location: ASSOC
2008-2009
Revised: 5/8/07

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

COMMON PROBLEMS/DISEASES
1. Respiratory failure
2. COPD
3. ARDS
4. Pneumonia, bacterial
5. Congestive heart failure
6. Electrolyte imbalance
7. Diabetes mellitus
8. Renal insufficiency

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 2 - 3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 8

TYPICAL WEEKLY SCHEDULE

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<td>9:00 Attending Rounds</td>
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<td>9:00 Attending Rounds</td>
<td>9:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 4:00 Pt. Care Activities</td>
<td>1:00 Team Conference</td>
<td>12:00 – 2:00 Clinical Conference</td>
<td>1:00 Team Conference</td>
<td>12:00 – 4:00 Pt. Care Activities</td>
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<td>2:00 – 4:00 Pt. Care Activities</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Free parking, free meals (breakfast & lunch)