PE305.01  PEDIATRIC ALLERGY/IMMUNODEFICIENCY/RHEUMATOLOGY

Subinternship  Location: CHS 2008-2009

Revised: 10/17/08

COURSE CHAIR:  Robert L. Roberts, M.D., Ph.D.  PHONE #: (310) 825-6481
FAX:  E-MAIL:

SUPPORTING FACULTY:  E. Richard Stiehm, M.D., Deborah McCurdy, M.D.

STUDENT EXPERIENCES

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

COMMON PROBLEMS/DISEASES
1. Asthma
2. Allergic rhinitis
3. Eczema
4. JRA
5. Lupus
6. Hypogammaglobulinemia
7. Urticaria
8. Other immunodeficiency disorders

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 80

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 9:00 Morning Report</td>
<td>8:00 – 9:00 Morning Report (Wright Library)</td>
<td>8:00 – 9:00 Morning Report</td>
<td>8:00 – 9:00 Morning Report (Wright Library)</td>
<td>8:00 – 9:00; Grand Rounds (Moss A-level)</td>
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<tr>
<td></td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
<td>9:00 * Immunology/Allergy Clinic</td>
<td>Inpatient Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Noon Conference</td>
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<tr>
<td></td>
<td>1:00 * Immunology Clinic</td>
<td>1:00 * Rheumatology Clinic</td>
<td>1:00 * Allergy/Immunology Clinic</td>
<td>1:00 * Allergy Clinic</td>
<td>1:00 * Rheumatology Clinic</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Evening Journal Clubs Monthly. * All Clinics are in Suite 265, 200 Medical Plaza
**COURSE CHAIR:** Dr. S. Inkelis  
**PHONE #:** (310) 222-3501 or (310) 222-6745  
**E-MAIL:**  
**SUPPORTING FACULTY:**  
Drs. Carol Berkowitz, Monica Sifuentes, Sara Stewart, and Kelly Young  
**STUDENT COORDINATOR:** Lisa Payne  
**PHONE #:** (310) 222-2343  
**E-MAIL:** lpayne@labiomed.org  
**REPORT TO:** Stanley Inkelis, M.D., Pediatric Emergency Department, 1st Floor, Harbor-UCLA Medical Center.  
**PREREQUISITES:** Pediatrics, Medicine, Surgery  
**AVAILABLE FOR EXTERNs:** Yes  
**STUDENTS / PERIOD:** max 1 min 1  
**DURATIOn:** 3 weeks  
**2008-2009 ROTATIONS BEGIN WEEKS:** 8, 11, 14, 17, 20, 27, 30, 33, 36, 39  
**DESCRIPTION:** The elective in Pediatric Emergency Medicine is designed to familiarize the student with care of the acutely ill pediatric patient. In addition, the student will be exposed to a paramedic unit and a child abuse unit.  

**STUDENT EXPERIENCES**

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. URI/Otitis media</td>
<td>0%</td>
<td>100%</td>
<td>0%</td>
<td>100%</td>
<td>X FULL-TIME FACULTY</td>
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<tr>
<td>2. Skin diseases</td>
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<td>X CLINICAL FACULTY</td>
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<tr>
<td>3. Gastroenteritis</td>
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<td>X FELLOWS</td>
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<tr>
<td>4. Asthma</td>
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<td></td>
<td></td>
<td>X RESIDENTS</td>
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<tr>
<td>5. Abdominal pain</td>
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<td>X INTERNS</td>
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<td>6. Pneumonia</td>
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<td>X OTHER: Nurses, Paramedics</td>
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<td>7. Trauma -- lacerations, fractures</td>
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<td>8. Urinary tract infections</td>
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**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:** 45  
**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:** 450  

**TYPICAL WEEKLY SCHEDULE**

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<th>Hour</th>
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<tr>
<td>AM</td>
<td>8:00 – 8:30 Chart Rounds</td>
<td>8:00 – 8:30 Chart Rounds</td>
<td>8:00 – 8:30 Chart Rounds</td>
<td>8:00 – 8:30 Chart Rounds</td>
<td>8:00 – 8:30 Chart Rounds</td>
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<tr>
<td></td>
<td>8:30 – 12:00 Peds ED</td>
<td>8:30 – 9:30 Peds ED Conference</td>
<td>8:30 – 12:00 Peds ED</td>
<td>8:30 – 9:30 Grand Rounds</td>
<td>8:30 – 9:30 Case Conference</td>
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<td>9:30 – 12:00 Peds ED</td>
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<td>9:30 – 12:00 Peds ED</td>
<td>9:30 – 12:00 Peds ED</td>
</tr>
</tbody>
</table>

| PM   | 1:00 – 5:00 Peds ED | 1:00 – 5:00 Peds ED | 1:00 – 5:00 Peds ED | 1:00 – 5:00 Paramedic Ride Along | 1:00 – 5:00 Peds ED |

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** 2-3 night shifts/week (4 p.m.–12 p.m.) in place of daytime shifts and one weekend shift.  
**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** One day is spent riding with a paramedic unit. One day is spent with the Sheriff's Department child abuse unit. When available, one half day every week is spent in an adolescent clinic. Attendance at noon time resident conference is encouraged.
PE320.02  PEDIATRIC EMERGENCY MEDICINE

Subinternship  Location: OVH  2008-2009  Revised: 11/29/07

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
Pamela D. Dyne, M.D.  (818) 364-3108
Rona Molodow, M.D.  (818) 364-3233

1. Gain comfort with the evaluation, diagnosis, and management of pediatric emergency complaints.
2. Gain experience in minor emergency procedures, including suturing, splinting, IV access, lumbar puncture, etc.
3. Gain experience in efficiently managing multiple emergency dept. patients simultaneously (according to the skills of the student).

E-MAIL:

SUPPORTING FACULTY:
Olive View-UCLA Departments of Emergency Medicine and Pediatrics faculty

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

STUDENT COORDINATOR:  PHONE #:  E-MAIL:
Susie Morissett  (818) 364-3108  smorissett@ladhs.org

REPORT TO:  Olive View-UCLA Medical Center, 14445 Olive View Dr., Sylmar, CA Pediatrics Clinic

PREREQUISITES:  Pediatrics, Medicine, Surgery

AVAILABLE FOR EXTERNS:  Yes

STUDENTS / PERIOD:  max 1  min 1

DURATION:  2 or 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
By Arrangement

DESCRIPTION:  The Pediatric Emergency Medicine subinternship allows the student to experience and participate in the care of acutely ill and emergent pediatric patients under the supervision of both the Pediatric Dept. and Emergency Dept. faculty and residents at Olive View-UCLA Medical Center.  The schedule is a mix of day, evening, and night shifts in the Pediatric Urgent Care Clinic (day shift) and Main Emergency Department (evening and night shifts), with attendance at both departments' resident didactic educational conferences.  The opportunity also exists to participate in the SCAN Clinic, paramedic ride-along, and community health vans.

COMMON PROBLEMS/DISEASES
1. Reactive airway disease
2. Abdominal pain/acute abdomen
3. Acute infectious disease
4. Pediatric fever evaluation
5. Minor trauma: including suspected child abuse
6. Seizures
7. Toxicology
8. Neonatal emergencies

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  30
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  750

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<tr>
<td>AM</td>
<td>7:30</td>
<td>8:00 – 11:00 EM Conferences</td>
<td>8:30 – 9:30 Peds Grand Rounds</td>
<td>1:00 – 8:00 Peds ED</td>
<td>8:00 – 11:00 EM Conferences</td>
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<tr>
<td></td>
<td>Pediatric Rounds</td>
<td>12:00 - 1:00 Peds Noon Conference</td>
<td>1:00 – 8:00 Peds ED</td>
<td>10:00 p.m. – 7:00 a.m. Peds ED Night Shift</td>
<td>12:00 – 4:00 Peds Urgent Conferences</td>
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<td></td>
<td>9:00 a.m. – 4:00 p.m. SCAN Clinic</td>
<td>9:30 a.m. – 5:00 p.m. Peds Urgent Care Clinic</td>
<td>9:30 a.m. – 5:00 p.m.</td>
<td>1:00 – 8:00 Peds Education</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  No call, only shifts as described. Saturday or Sunday:  8a.m. –  8 p.m. Peds ED shift.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Peds/EM combined Conference on 4th Thursday of EACH MONTH 8:15–9:15; EM Journal Club, 7pm on 3rd Monday of EACH MONTH; Peds Journal Club; 1 paramedic ride-along, (in lieu of shift); 1 day with community health van (in lieu of shift)
STUDENT EXPERIENCES

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

COMMON PROBLEMS/DISEASES

INPATIENT: 5%
OUTPATIENT: 95%
CONSULTATION: 100%
PRIMARY CARE: 0%

1. Chronic diarrhea
2. Abdominal pain
3. Acute gastroenteritis
4. Chronic vomiting
5. Constipation
6. Fecal incontinence
7. Hepatomegaly/chronic liver disease
8. Hepatitis

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<td>7:30</td>
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<td>8:00</td>
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<tr>
<td></td>
<td>*Various Outreach Clinics</td>
<td>GI Clinic (Vargas, Martin and Mehra)</td>
<td>*Various Outreach Clinics</td>
<td>GI Clinic (Ament)</td>
<td>Gi Clinic (Wu and Ziring)</td>
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<td></td>
<td>Gi Clinic (Venick)</td>
<td>9:00</td>
<td>8:00: Pediatric Liver Transplant Clinic</td>
<td>9:00</td>
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<td></td>
<td>12:00 Noon Lecture</td>
<td>Gi Clinic (Vargas &amp; Martin)</td>
<td>12:00: Noon Conference</td>
<td>12:00: Noon Conf.</td>
<td>12:30: Adult/Ped Journal Club</td>
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<td>5:00 Liver Biopsy Conference (1P-329 CHS)</td>
<td>12:00</td>
<td>1:00</td>
<td>2:00</td>
<td>(Hanx, 2nd Fl.)</td>
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<td>12:00</td>
<td>1:00</td>
<td>Noon Conference</td>
<td>1:00</td>
<td>1:30 Ped GI Teaching Conf.</td>
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<td>Liver Clinic (McDiarmid)</td>
<td>12:00: Noon Conf.</td>
<td>1:00</td>
<td>(Haimer 22-426 MDCC)</td>
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<td>1:00</td>
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<td>Gi Clinic (Vargas &amp; Ament)</td>
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<td>GI Clinic (Ament)</td>
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<td>5:00: GI Path Conf. (1P-329 CHS)</td>
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<td>(Ament &amp; Vargas)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: **Outreach clinics: 1) Bakersfield Digestive Disease Center (1st Monday of each month, 8:00 a.m. – 6:00 p.m., Drs. Vargas & Ament); 2) Kern County Sagebrush Medical (1st & 3rd Wednesday of EACH MONTH 8:00 a.m.– 1:00 p.m., Drs. Vargas & Ament); 3) Ventura Pediatric Clinic (2nd & 4th Monday of EACH MONTH, 1:00-4:00 p.m., Dr. Ament; 1st & 3rd Thursday of EACH MONTH, 1:00-4:00 p.m., Dr. Mehra)
PE350.01 YOUNG ADULT MEDICINE

Subinternship

Location: ASSOC (ASHE CENTER)

2008-2009 Revised: 6/1/08

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

1. Full-time Faculty
2. Clinical Faculty
3. Fellows
4. Residents
5. Interns
6. Other

COMMON PROBLEMS/DISEASES

1. Respiratory problems
2. Dermatologic problems
3. Minor trauma
4. Psychosocial /developmental issues
5. Asthma & Allergies
6. Gastrointestinal problems
7. Genito-urinary problems
8. Musculo-skeletal problems

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 1,125

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 12:00 Primary Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

This elective allows the student to construct a unique educational experience in providing healthcare and increasing awareness of the health issues of the college-age student population. Sports medicine, dermatology, mental health, nutritional and other issues unique to young adults are emphasized. This elective can be modified to meet the interests of the fourth-year medical student. Students will periodically meet with a preceptor to review learning issues and to present as requested by the preceptor.

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

1. Full-time Faculty
   2. Clinical Faculty
   3. Fellows
   4. Residents
   5. Interns
   6. Other

COMMON PROBLEMS/DISEASES

1. Respiratory problems
2. Dermatologic problems
3. Minor trauma
4. Psychosocial /developmental issues
5. Asthma & Allergies
6. Gastrointestinal problems
7. Genito-urinary problems
8. Musculo-skeletal problems

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 1,125

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
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<td>AM</td>
<td>8:00 – 12:00 Primary Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Respiratory tract diseases
2. Gastrointestinal diseases
3. Dermatologic diseases
4. Minor Trauma
5. Communicable diseases
6. Developmental delay
7. Well Child Care
8. Child Abuse

CLOSE CONTACT WITH:

5% INPATIENT: FULL-TIME FACULTY
95% OUTPATIENT: CLINICAL FACULTY
10% CONSULTATION: FELLOWS
90% PRIMARY CARE: RESIDENTS

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 25
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 695

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Per individual agreement.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
PE350.04 ADOLESCENT MEDICINE

Subinternship Location: CHS 2008-2009 Revised: 11/20/07

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Nurse practitioner, Physician's assistant

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Acute infectious disease
2. Sexually transmitted disease
3. Dermatologic disorders
4. Menstrual disorders
5. Abnormalities of growth and development
6. Substance use and abuse
7. Sports and over-use injuries
8. Depression

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 19
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 180

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>San Fernando High School</td>
<td>San Fernando High School</td>
<td>OFF</td>
<td>San Fernando High School</td>
<td>8:00 – 9:30 Adolescent Lecture 9:30 – 12:00 AM Clinic</td>
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<tr>
<td>PM</td>
<td>Robert Levine Health Center (RLHC)</td>
<td>Culver City Youth RLHC</td>
<td>RLHC</td>
<td>UCLA Adolescent MD Clinic</td>
<td>UCLA Adolescent Clinic</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective attempts to stimulate the interest of students in the health care of adolescents. The training sites have been chosen to provide the widest exposure to adolescent problems possible in a four-week rotation. The student must be willing to travel to several different sites during this week.
### Description of the Clerkship

The clerkship provides a wide variety of experience with outpatient pediatric medical problems. Students function in the Children's Center as subinterns in the Pediatric Emergency Room and Primary Care Center. Students have responsibility for diagnosis, treatment, and follow up of their patients. Close supervision is provided by full-time faculty and fellows. Students participate in all primary care departmental conferences and Grand Rounds.

### Course Objectives

1. Basic knowledge of children in different age groups including newborn, infant, toddler, preschool age, and adolescent. Basic psychosocial development.
2. Improved history, physical examination, and presentation of pediatric patients.
3. Ability to treat common pediatric problems, including otitis media, diarrhea, urinary tract infections, asthma, seizures, etc.
4. Ability to judge severity of illness in a child and when a child should be hospitalized.
5. Ability to interpret laboratory data in pediatric patients.
8. Utilization of pediatric health care team including pediatric nurse practitioner.

### Student Experiences

**Close Contact With:**
- 100% Outpatient
- 25% Consultation
- 75% Primary Care
- 0% Inpatient

### Approximate # of Patients Evaluated Each Week by Student:

- **25**

### Total # of Patients Evaluated Each Week by Entire Service:

- **500**

### Typical Weekly Schedule

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<th>Day</th>
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<tr>
<td>Monday</td>
<td>8:00 – 9:00</td>
<td>12:00 – 1:00</td>
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<tr>
<td></td>
<td>Outpatient Conference</td>
<td>Noon Conferences</td>
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<td>9:00 Primary Care Clinic</td>
<td>1:00 – 5:00 Primary Care Clinic</td>
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<tr>
<td>Tuesday</td>
<td>8:00 – 9:00</td>
<td>12:00 – 1:00</td>
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<tr>
<td></td>
<td>Morning Report</td>
<td>Noon Conferences</td>
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<tr>
<td></td>
<td>9:00 Primary Care Clinic</td>
<td>1:00 – 5:00 Primary Care Clinic</td>
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<tr>
<td>Wednesday</td>
<td>8:00 – 9:00</td>
<td>12:00 – 1:00</td>
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<tr>
<td></td>
<td>Outpatient Conference</td>
<td>Noon Conference</td>
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<td></td>
<td>9:00 Primary Care Clinic</td>
<td>1:00 – 5:00 Primary Care Clinic</td>
</tr>
<tr>
<td>Thursday</td>
<td>8:00 – 9:00</td>
<td>12:00 – 1:00</td>
</tr>
<tr>
<td></td>
<td>Outpatient Conference</td>
<td>Noon Conference</td>
</tr>
<tr>
<td></td>
<td>9:00 Primary Care Clinic</td>
<td>1:00 – 5:00 Primary Care Clinic</td>
</tr>
<tr>
<td>Friday</td>
<td>8:00 – 9:00</td>
<td>12:00 – 1:00</td>
</tr>
<tr>
<td></td>
<td>Grand Rounds</td>
<td>Noon Conference</td>
</tr>
<tr>
<td></td>
<td>9:00 Primary Care Clinic</td>
<td>1:00 – 5:00 Primary Care Clinic</td>
</tr>
</tbody>
</table>

### Comments Below

**On-Call Schedule & Weekend Activities:** Night call once a week, 5 – 11 p.m., in Pediatric Emergency Room.

**Additional Comments and Other Special Requirements:** “After two weeks the clerk may wish to spend time in subspecialty clinics including cardiology, renal, allergy/immunology, cystic fibrosis, hematology, endocrinology, neurology, etc.”
PE360.01  PEDIATRIC NEPHROLOGY

Subinternship  Location: CHS  2008-2009  Revised: 11/15/07

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
Ora Yadin, M.D.  (310) 206-6987

1. Diagnosis and treatment of pediatric patients with a variety of renal diseases, in both the inpatient and outpatient setting.
3. Learn to integrate theoretical knowledge of mechanisms and therapies with practical patient care.
4. Learn to present relevant information to attendings, fellows and residents in a clear and comprehensive manner.
5. Research, prepare and present a seminar on a pediatric-technology subject.

SUPPORTING FACULTY:
Pediatric Nephrology Faculty

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

STUDENT COORDINATOR:  PHONE #:  E-MAIL:
Emily Chan  (310) 825-4128  emilychan@mednet.ucla.edu

REPORT TO: Pediatric Education Office, 12-335 MDCC, 8:00 a.m.

PREREQUISITES: Pediatrics, Medicine, 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: Students will attend all general nephrology clinics at UCLA (Thursday mornings) and outreach clinics at Bakersfield and Ventura. Students will attend one transplant clinic (Monday morning) and one dialysis clinic (Wednesday morning) during their elective. They will participate in patient care and education activities on the floor with the renal service.

COMMON PROBLEMS/DISEASES

<table>
<thead>
<tr>
<th>INPATIENT</th>
<th>OUTPATIENT</th>
<th>CONSULTATION</th>
<th>PRIMARY CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nephrotic Syndrome</td>
<td>50%</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>2. Hematuria</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3. Urinary Tract Infections</td>
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<td></td>
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<tr>
<td>4. Chronic Renal Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Hemodialysis</td>
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<td></td>
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<tr>
<td>6. Peritoneal Dialysis</td>
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<td></td>
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<tr>
<td>7. Renal Transplantation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Hypertension</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>9. Acute Renal Failure</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 33

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>8:30 – 12:00 Transplant Clinic 200 Med Plaza Module 2</td>
<td>4th Tuesday/mo Bakersfield Clinic 7:00 am MDCC pt. Drop Off 7:30 – 8:30 Adult Neph. Journal Club 200 Med Plaza</td>
<td>1st Wednesday/mo 7:30 am MDCC pt Drop off 9:00 – 12:00 Dialysis Clinic 200 Med Plaza, Module 1</td>
<td>7:00 – 8:00 Renal Grand Rounds Wadsworth VA 9:00 – 12:30, General Nephrology Clinic 200 Med Plaza Module 1</td>
<td>7:15 – 8:15 Pathophysiology Course Wadsworth VA 8:00 - 9:00 Pediatric Grand Rounds 10:00 – 11:00 Dialysis Post Clinic</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 – 3:00 Post-Transplant Clinic (200 Med Plaza)</td>
<td>1:00 – 2:00 Peds Neph. Journal Club/Seminar</td>
<td>12:00 – 1:00 Adult Neph./Ped Neph. Conference</td>
<td></td>
<td>12:00 – 1:00 Didactic Conference 1:00 – 2:00 Patient Sign-Out</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will be required to give one Journal Club/Seminar during the rotation.
PE420.01 PEDIATRIC CRITICAL CARE SUBINTERNSHIP

Subinternship/Inpatient Location: HARBOR 2008-2009 Revised: 11/28/06

COURSE CHAIR: Richard Mink, M.D. PHONE #: (310) 222-4002
FAX:

SUPPORTING FACULTY: Dr. Bonnie Rachman and Dr. Tom Kallay

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

COMMON PROBLEMS/DISEASES
1. Respiratory Failure
2. Cardiac Disease
3. Shock
4. Sepsis
5. Trauma

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 13 - 18

TYPICAL WEEKLY SCHEDULE

Hour Monday Tuesday Wednesday Thursday Friday
AM
7:00–7:30: Sign out received by PICU residents from Night Float (NF)
7:30–7:45: Morning Report w/ Dr. Jonas (NF)
7:45-8:30: Pre-round 8:30-9:30: Bedside Rds Attending
9:30-9:45: X-Ray Rds
9:45-11:30: Bedside Rds/ Didactic
12:00 – 1:00: Res. Conf. 5:00pm: Short call resident of duty
7:00: PICU resident NF signout
7:00– 7:30: Sign out received by PICU residents from NF
7:30 – 7:45: Morning Report w/ Dr. Jonas (NF)
7:45-8:30: Pre-round 8:30-9:30: Bedside Rounds Attending
9:30-9:45: X-Ray Rds
9:45-11:30: Bedside Rds/Didactic
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7:00– 7:30: Sign out received by PICU residents from NF
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9:30-9:45: X-Ray Rds
9:30-12:00: Bedside Rounds/Didactic
5:00pm: Short call resident off duty
7:00: PICU resident NF signout

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: In-house overnight call every 4th night (w/a resident). One weekend day, each week. Saturday/Sunday: TIME PER ATTENDING BUT NO LATER THAN 10:00 AM bedside rounds with attending.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: *Rounds with Attending 9:45–11:45 if ED Conference on Wednesday. NOTE: Residents MUST examine their patients and collect appropriate data prior to rounds with senior resident and attending.

The PICU at Harbor-UCLA is a multidisciplinary unit with approximately 600 admissions annually. Admissions to the PICU encompass a wide variety of common pediatric diseases, such as respiratory failure and traumatic injury. In addition to the medical student, the team includes a pediatric critical care attending and fellow, and two pediatric residents.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 13 - 18

STUDENT COORDINATOR: Lisa Payne PHONE #: (310) 222-2343
FAX: E-MAIL: lpayne@labiomed.org

REPORT TO: PICU 6th Floor @ 8:00 a.m.

PREREQUISITES: Pediatrics, Medicine, and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
By Arrangement

DESCRIPTION:

COURSE OBJECTIVES (in order of importance):
1. To be able to recognize the clinical presentation of a critically ill infant and child.
2. To understand how to manage fluids and electrolytes.
3. To learn about the types of shock and their treatment.
4. To gain a basic appreciation of respiratory distress and/or failure in infants and children and its management, including the use of mechanical ventilation.
5. To understand the clinical presentation, pathophysiology and treatment of traumatic injuries in children.
6. To acquire a basic understanding of medications used for hemodynamic support.

DESCRIPTION: The PICU at Harbor-UCLA is a multidisciplinary unit with approximately 600 admissions annually. Admissions to the PICU encompass a wide variety of common pediatric diseases, such as respiratory failure and traumatic injury. In addition to the medical student, the team includes a pediatric critical care attending and fellow, and two pediatric residents.

COURSE CHAIR: Richard Mink, M.D. PHONE #: (310) 222-4002
FAX:

SUPPORTING FACULTY: Dr. Bonnie Rachman and Dr. Tom Kallay

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

COMMON PROBLEMS/DISEASES
1. Respiratory Failure
2. Cardiac Disease
3. Shock
4. Sepsis
5. Trauma

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 13 - 18

TYPICAL WEEKLY SCHEDULE

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5:00pm: Short call resident off duty
7:00: PICU resident NF signout

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: In-house overnight call every 4th night (w/a resident). One weekend day, each week. Saturday/Sunday: TIME PER ATTENDING BUT NO LATER THAN 10:00 AM bedside rounds with attending.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: *Rounds with Attending 9:45–11:45 if ED Conference on Wednesday. NOTE: Residents MUST examine their patients and collect appropriate data prior to rounds with senior resident and attending.

DESCRIPTION: The PICU at Harbor-UCLA is a multidisciplinary unit with approximately 600 admissions annually. Admissions to the PICU encompass a wide variety of common pediatric diseases, such as respiratory failure and traumatic injury. In addition to the medical student, the team includes a pediatric critical care attending and fellow, and two pediatric residents.

COURSE OBJECTIVES (in order of importance):
1. To be able to recognize the clinical presentation of a critically ill infant and child.
2. To understand how to manage fluids and electrolytes.
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DESCRIPTION: The PICU at Harbor-UCLA is a multidisciplinary unit with approximately 600 admissions annually. Admissions to the PICU encompass a wide variety of common pediatric diseases, such as respiratory failure and traumatic injury. In addition to the medical student, the team includes a pediatric critical care attending and fellow, and two pediatric residents.

DESCRIPTION: The PICU at Harbor-UCLA is a multidisciplinary unit with approximately 600 admissions annually. Admissions to the PICU encompass a wide variety of common pediatric diseases, such as respiratory failure and traumatic injury. In addition to the medical student, the team includes a pediatric critical care attending and fellow, and two pediatric residents.
COURSE CHAIR: Theodore Moore, M.D. 
PHONE #: (310) 825-6708

SUPPORTING FACULTY: 
Drs. Kathleen Sakamoto, Christopher Denny, Jacqueline Casillas, Brigitte Gomperts

STUDENT COORDINATOR: Emily Chan 
PHONE #: (310) 825-4128
E-MAIL: emilychan@mednet.ucla.edu

REPORT TO: Emily Chan, Pediatric Education Office, 12-335 MDCC, 8:00 a.m.

PREREQUISITES: Pediatrics, Inpatient Medicine, Ambulatory 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: The goal of this rotation is that the student develop a systematic approach to the analysis of hematologic and oncologic problems, and the infectious and metabolic disorders which complicate their treatment. The student will assume primary responsibility for all assigned inpatients, supervised by the Pediatric faculty. The student will be expected to follow at least 1-2 complicated patients, including those who have undergone bone marrow transplantation. The student will also be expected to do consults requested by other Pediatric services. Call will be every 4th night. The student will be expected to round on patients on weekends.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Leukemia
2. Solid tumors
3. Sickle cell disease
4. Anemia
5. Bleeding disorders
6. Transplants
7. Aplastic anemia

INPATIENT: 100%
OUTPATIENT: 0%
CONSULTATION: N/A
PRIMARY CARE: N/A

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 30

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 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds 10:30-11:00 Core lectures (Consults)</td>
<td>8:00 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds (Consults)</td>
<td>8:00 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds 10:30-11:00 Core lectures (Consults)</td>
<td>9:00 – 10:30: Ward Rds 10:30-11:00 Core lectures (Consults)</td>
<td>8:00 – 9:00 Pediatric Grand Rounds 9:00 – 10:30 Ward Rounds (Consults)</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 – 2:30 Psychosocial Rounds 1:00-2:00 Board Review 2:00 – 4:00 Clinical Conference</td>
<td>(Consults) Ward/Patient Work</td>
<td>12:00 – 1:00 Pediatric Research Conference</td>
<td>12:30 – 4:00 Clinic Conference</td>
<td></td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Call every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: We aim for the student to become proficient in the diagnostic and therapeutic subspecialty procedures (chemotherapy administration, and a familiarity with the pathophysiology of hematology-oncology and the principles of chemotherapy). The student will meet regularly with a member of the Division of review teaching materials and discuss specific subjects. The student will attend the various Division conferences and review topics of current interest with the group.
COURSE CHAIR:  Shahram Yazdani, M.D.  
PHONE #:  (310) 206-8750

SUPPORTING FACULTY:
Pediatric Staff

STUDENT COORDINATOR:  Emilie Chan  
PHONE #:  (310) 825-4128  
E-MAIL: emilychan@mednet.ucla.edu

REPORT TO:  Emilie Chan, Pediatric Education Office, 12-335 MDCC, 8:00 a.m.

PREREQUISITES:  Pediatrics, Medicine, and Surgery

AVAILABLE FOR EXTERNALS:  Yes

STUDENTS / PERIOD:  max 1 min 1

DURATION:  3 weeks

2008-2009 ROTATIONS BEGIN WEEKS:
1. 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION:  Students will function on the Pediatric Inpatient Service as subinterns and will be part of the ward team consisting of interns, a senior resident, and attending physician. The student will take full responsibility for the care and management of her/his patients and will be expected to present and discuss their cases and participate in attending rounds.

COURSE OBJECTIVES (in order of importance):
1. Facility in the evaluation of the pediatric patient.
2. Understanding of the pathophysiology, differential diagnosis, and management of common pediatric problems.
3. Learning how to participate as a member of a broad team of physicians and allied health personnel in a comprehensive approach to health care in Pediatrics.
4. Acceptance of primary responsibility for care of the pediatric patient (under supervision).

COMMON PROBLEMS/DISEASES
1. Acute respiratory disease, e.g., asthma
2. Acute/chronic GI
3. Meningitis/Sepsis
4. Neurologic disorders
5. Post-op surgical

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 44

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>
</table>
| AM   | 7:30 – 8:00 Pre-Round  
8:00 – 9:00 Morning Report.  
9:00 – 10:30 Attending Rounds  
11:30 – 12:00 X-ray Rounds  
12:00 – 1:00 Noon Conference  
Patient Care on Ward | 7:30 – 8:00 Pre-Round  
8:00 – 9:00 Morning Report.  
9:00 – 10:30 Attending Rounds  
12:00 – 1:00 Noon Conference  
Patient Care on Ward | 7:30 – 8:00 Pre-Round  
8:00 – 9:00 Morning Report.  
9:00 – 10:30 Attending Rounds  
12:00 – 1:00 Noon Conference  
Patient Care on Ward | 7:30 – 8:00 Pre-Round  
8:00 – 9:00 Morning Report.  
9:00 – 10:30 Attending Rounds  
12:00 – 1:00 Noon Conference  
Patient Care on Ward | 7:30 – 8:00 Pre-Round  
8:00 – 9:00 Morning Report.  
9:00 – 10:30 Attending Rounds  
12:00 – 1:00 Noon Conference  
Patient Care on Ward |
|      |        |         |           |          |        |
| PM   |        |         |           |          |        |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  On call every fifth night.  Weekend duties to be arranged with house staff.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
PE450.02  PEDIATRICS

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

COURSE CHAIR:
Lee Todd Miller, M.D.
Abhay Dandekar, M.D.

SUPPORTING FACULTY:
Kate Perkins, M.D., Ph.D.

STUDENT COORDINATOR:
Esther S. Tolentino
PHONE #: (310) 423-4780
E-MAIL: tolerinoe@cshs.org

REPORT TO: Esther S. Tolentino, Cedars-Sinai Medical Center, Rm. 4400, 8:45 a.m.

PREREQUISITES: Pediatrics, Medicine, 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: The medical students will function as interns. Each student will meet with Dr. Miller and/or Dr. Cho on the first day to determine how the rotation is to be structured with educational goals and objective. Rotations are based on the individual interests and needs of the student. Students will care for patients of all socioeconomic backgrounds and with a mix of pathology ranging from "bread and butter" problems to tertiary care inpatient pediatrics.

COURSE OBJECTIVES (in order of importance)
1. Managing a mix of "bread and butter" inpatients and those requiring tertiary and quaternary care.
2. Knowledge of normal human growth and development from birth to 17 years.
3. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis, and management of disease of infants, children, and adolescents, both inpatient and outpatient.
4. Improved case presentations and discussion on ward rounds and at teaching conferences.
5. Understanding doctor-patient relationships and the inter-relationships between physicians, nurses, social service workers, child-life specialists, and ancillary personnel to achieve the best in pediatric care.

COMMON PROBLEMS/DISEASES
1. Fever, Sepsis, Meningitis, Pneumonia, Bronchiolitis
2. Diarrhea and Dehydration
3. Status Asthmaticus
4. Seizure Disorders
5. Acute Abdomen
6. Trauma
7. Active Oncology Service
8. End-Stage Renal Failure
9. Sickle Cell Anemia

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5 - 8
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 40 - 45

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>7:30 – 8:30: Work Rds 8:45 – 10:00: Morning Report &amp; Attending Rds 10:30 – 11:00: Radiology Teaching Conference</td>
<td>7:30 – 8:30: Work Rds 8:45 – 10:00: Morning Report &amp; Attending Rds 10:30 – 11:00: Radiology Teaching Conference</td>
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<td>7:30 – 8:30: Work Rds 8:45 – 10:00: Morning Report &amp; Attending Rds 10:30 – 11:00: Radiology Teaching Conference</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 Noon Teaching Conference 1:30 – 2:00 Physical Diagnosis Rounds with Dr. Cho</td>
<td>12:00 Noon Teaching Conference 1:30 – 2:30 Attending Rounds with Dr. Miller</td>
<td>12:00 Noon Teaching Conference 1:30 – 2:30 Attending Rounds with Dr. Miller</td>
<td>12:00 Noon Teaching Conference 1:30 – 2:30 Attending Rounds with Dr. Miller</td>
<td>12:00 Noon Teaching Conference</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student will meet with Dr. Miller and Dr. Cho on a regular basis for "small group" teaching sessions.
SUBINTERNSHIP/INPATIENT

Location: HARBOR 2008-2009

Revised: 11/26/07

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER:

90%
10%
0%
100%

COMMON PROBLEMS/DISEASES

1. Acute respiratory disorders
2. Acute gastroenteritis & dehydration
3. Emergent trauma
4. Acute pediatric surgical conditions
5. Serious infections
6. Growth, developmental & nutritional disorders
7. Congenital heart disease

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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</thead>
</table>
| AM   | 7:30 – 8:00: Work Rounds
8:00 – 8:30: Morning Report
8:30 – 11:30: X-ray Conference & Attending Rounds | 7:30 – 8:00: Work Rounds
8:30 – 10:30 Attending Rounds | 7:30 – 8:00: Work Rounds
8:00 – 8:30: Morning Report
8:30 – 11:30: X-ray Conference & Attending Rounds | 7:30 – 8:30 Work Rounds
8:30 – 9:30 Pediatric Grand Rounds
10:30 – 12:00 Attending Rounds | 7:30 – 8:00: Work Rounds
8:00 – 8:30: Case Conference
10:30 – 12:00: Attending Rounds |
| PM   | New patient workups | New patient workups | New patient workups | New patient workups | New patient workups |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth evening and one weekend day; attending rounds on Saturday or Sunday morning, depending on call schedule.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: One in seven days off, averaged over three weeks.
COURSE CHAIR: Steven D. Woods, M.D. 
PHONE #: (323) 783-5311

SUPPORTING FACULTY: 
Tim Degner, M.D., Chief, Dept. of Pediatrics, Steven Woods, M.D., and Staff

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: Pediatrics, Medicine, and Surgery

AVAILABLE FOR EXTERNALS: 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: Students will assume responsibilities similar to those of an intern. The student will be a member of the ward service, consisting of Pediatric Housestaff and an attending pediatrician. Participation in the extensive pediatric teaching program will be required, with students presenting and discussing patients on a regular basis.

STUDENT EXPERIENCES:

COMMON PROBLEMS/DISEASES
1. Infection of CNS 
2. Status Asthmaticus 
3. Acute & Chronic Gastro-enteric diseases 
4. Pneumonia & other Respiratory infections 
5. Oncological diseases 
6. Acute and Chronic surgical diseases 
7. Pediatric ICU Cases 
8. Neurological & Neurosurgical Diseases

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5 - 6

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

TYPICAL WEEKLY SCHEDULE:

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth night until 10:00 p.m.; weekends and holidays off

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Parking is provided. * In addition to the Pediatric Grand Rounds on the Wednesday-PM schedule, activities include Visiting Lecturers, Quality Assurance, Morbidity/Mortality Conf, Radiology Teaching Conf, and Case Presentations and discussion.** Other Health Care Providers with whom students have close contact: Ped-Nurse Practitioners, Ped-Social Workers, Ped-Nutritionists, Respiratory Therapists.
PE455.03 PEDIATRIC INTENSIVE CARE UNIT SUBINTERNSHIP

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

COURSE CHAIR: Rick Harrison, M.D. PHONE #: (310) 825-4128

SUPPORTING FACULTY: Judith Brill, M.D., Irwin Weiss, M.D., Andranik Madikians, M.D., James Lin, M.D., Myke Federman, M.D.

STUDENT COORDINATOR: Emily Chan PHONE #: (310) 825-4128 FAX: E-MAIL: emilychan@mednet.ucla.edu

REPORT TO: UCLA Pediatric Intensive Care Unit, Rm. 5400 RR-UCLA Med. Ctr., 7:00 a.m.

PREREQUISITES: Medicine, Surgery, & Pediatrics

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 1 min 1 (2 w/approval by dir. only)

DURATION: 3 weeks (for 2 weeks use Drop/Add Petition after June 5, 2007)

2008-2009 ROTATIONS BEGIN WEEKS:
6, 9, 12, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: The pediatric intensive care unit (PICU) at UCLA is a 20-bed multidisciplinary intensive care unit. The PICU Service follows all patients in the PICU often with multiple other medical and/or surgical services involved. The service consists of one faculty member, one PICU fellow, two senior pediatric resident, and one pediatric intern, in addition to the medical student(s) on the team.

COURSE OBJECTIVES (in order of importance):
1. Improved history and physical examination of critically ill children.
2. Synthesis of history, physical examination, and laboratory data into a differential diagnosis.
3. Ability to analyze condition of patient and make appropriate therapeutic plans for complex ICU problems.
4. Learn and/or improve procedures, including IV’s, lumbar puncture, arterial catheters, and intubation.
5. Improve patient presentations.
6. Integrate basic ventilator function into therapy of respiratory failure.
7. Utilize physiologic principles to guide clinical interventions.
8. Work as part of a health care team, utilizing other health care professionals as appropriate.
9. Appreciate cost effectiveness of various laboratory and radiologic examinations.
10. Understand psychosocial issues related to caring for critically ill children.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Respiratory failure
2. Shock
3. Sepsis
4. Liver failure
5. Complex congenital heart disease
6. Seizures
7. Trauma
8. Organ transplantation

INPATIENT: 100%
OUTPATIENT: 0%
CONSULTATION: 50%
PRIMARY CARE: 50%

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNs
X OTHER: Respiratory Therapists, Nurses

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 23

TYPICAL WEEKLY SCHEDULE

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<thead>
<tr>
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<tr>
<td>6:30 – 7:30</td>
<td>Pre-Rnds</td>
<td>6:30 – 7:00</td>
<td>Pre-Rounds</td>
<td>6:30 – 7:00</td>
<td>Pre-Rounds</td>
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<tr>
<td>7:30 – 10:00</td>
<td>Morning Rds</td>
<td>7:00 – 7:30</td>
<td>Lecture</td>
<td>7:00 – 7:30</td>
<td>Pre-Rounds</td>
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<td>10:00 – 11:30</td>
<td>Patient Care</td>
<td>7:30 – 10:00</td>
<td>Morning Rounds</td>
<td>7:00 – 10:30</td>
<td>Lecture</td>
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<td>11:30 – 12:00</td>
<td>X-ray Rds</td>
<td>10 – 11:30</td>
<td>Patient Care</td>
<td>11:30 – 12:00</td>
<td>Morning Rounds</td>
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<td>12:00 – 1:00</td>
<td>X-ray Rds</td>
<td>11:30 – 12:00</td>
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<td>1:00 – 5:00</td>
<td>Peds Noon Conf.</td>
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<td>Patient Care</td>
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<td>5:00 – 6:30</td>
<td>Patient Care</td>
<td>5:00 – 6:30</td>
<td>PICU Lecture</td>
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<td>PICU Lecture</td>
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<td>TYPICAL WEEKLY SCHEDULE</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One night call per week. On weekends, student is expected to round on his/her patients, provide daily care, write daily notes, and then may check out to senior resident.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student will be the direct care provider to a wide range of critically ill children. This will entail extremely close interaction with PICU faculty and fellows, with ample time for 1:1 teaching.
COURSE OBJECTIVES (in order of importance)

1. Learn major newborn diseases: pathophysiology, treatment, and outcome.
2. Observe and/or participate in most frequent procedures: resuscitation, intubation, umbilical line placement, venipuncture, I.V. placement, thoracentesis, chest tube placement, exchange transfusion.
4. Learn the presentation and exam of normal newborns and how to identify/differentiate abnormalities on exam.
5. Learn to interact with parents/family of critically ill infants and provide psychosocial support.

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

X FULL-TIME FACULTY
CLINICAL FACULTY
X FELLOWS
X RESIDENTS
OTHER:

COMMON PROBLEMS/DISEASES

1. Respiratory distress syndrome
2. Congenital malformations
3. Congenital heart disease
4. Prematurity
5. Perinatal asphyxia
6. Jaundice
7. Cyanosis
8. Jitteriness/seizures

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:

8

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>7:00 - Prerounds</td>
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<td>8:00 - Teaching Lecture</td>
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<td>8:30 - 10:30 - Teaching Rounds</td>
<td>8:30 - 10:30 - Teaching Rounds</td>
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<td>11:00 - Radiology Rnds</td>
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<td>PM</td>
<td>12:00 - Resident Lecture</td>
<td>12:00 - Neonatology Conf.</td>
<td>12:00 - Resident Lecture</td>
<td>12:00 - Resident Lecture</td>
<td>12:00 - Resident Lecture</td>
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<td>1:00 – 5:00 - NICU Work</td>
<td>1:00 – 5:00 - NICU Work</td>
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<td>5:00 - Sign-Out Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night until 10:00 p.m.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: None
STUDENT EXPERIENCES

CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Social worker, dietitian

COMMON PROBLEMS/DISEASES
1. Hyperbilirubinemia
2. Prematurity
3. Respiratory distress
4. Neonatal infection
5. Congenital anomalies
6. Birth asphyxia/trauma

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3 - 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 8 - 11

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
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<td>AM</td>
<td>7:30</td>
<td>8:00 – 10:30</td>
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<td>8:30 – 10:30</td>
<td>7:30: Sign-In Rounds</td>
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<td></td>
<td>Sign-in Rounds</td>
<td>Pediatric Clinical Conference</td>
<td>Attending Rounds</td>
<td>Discharge Planning Conference</td>
<td>8:15 – 9:15 Perinatal Statistics Conference 7:30 – 11:30 Attending Rounds</td>
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<td>8:30 – 10:30</td>
<td>Attending Rounds</td>
<td>9:30 – 11:30</td>
<td>9:30 – 11:30</td>
<td>1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
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<td></td>
<td>1:00 – 3:00: Physical Examination and Progress Note Completion</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
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<td>PM</td>
<td>12:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Academic Conference 1:00 – 3:00: Physical Exam &amp; Progress Note 3:00 – 4:00: Didactic Neonatal Conference</td>
<td>12:00: Didactic Neonatal Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night call

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
PE485.03  NEONATOLOGY

Subinternship/Inpatient
Location: KAISER.SUN
2008-2009
Revised: 8/18/08

COURSE OBJECTIVES (in order of importance)
2. Delivery Room experience with emphasis on neonatal resuscitation and stabilization of the sick newborn.
3. Diagnosis and management of the acutely ill newborn.
5. Improved clinical judgment, synthesis of information, and skill at common procedures.
6. Pharmacology of commonly used drugs in infants.

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

COMMON PROBLEMS/DISEASES
1. Normal Newborn Assessment
2. Prematurity
3. Sepsis Neonatorum
4. Hyaline Membrane Disease
5. Transient Tachypnea
6. Apnea of Prematurity
7. Congenital/Chromosomal anomalies
8. Labor and delivery room experience
9. Neonatal Resuscitation

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4 - 6
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 50

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth night until 10:00 p.m.; Weekends and holidays off.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Parking is provided. * In addition to the Pediatric Grand Rounds on the Wednesday-PM schedule, activities include Visiting Lecturers, Quality Assurance, Morbidity/Mortality Conf, Radiology Teaching Conf, and Case Presentations and discussion. ** Other Health Care Providers with whom students have close contact are: Ped-Nurse Practitioners, Ped-Social Workers, Ped-Nutritionists, Respiratory Therapists.
COMMON PROBLEMS/DISEASES

1. Premature infants
2. RDS
3. Other neonatal lung diseases
4. Neonatal asphyxia
5. Bilirubin problems
6. Nutritional problems
7. Neonatal surgery
8. Congenital malformations

INPATIENT: 95%
OUTPATIENT: 5%
CONSULTATION: 0%
PRIMARY CARE: 100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>Work Rounds</td>
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<td></td>
<td>Faculty Teaching Rounds</td>
<td>Faculty Teaching Rounds</td>
<td>Prenatal Case Conf.</td>
<td>Grand Rounds</td>
<td>Chief's Rounds</td>
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<td>Patient Care</td>
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<tr>
<th>PM</th>
<th>Patient Care</th>
<th>Patient Care</th>
<th>Patient Care</th>
<th>Faculty Teaching Rounds</th>
<th>High-Risk Neonatal</th>
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<tr>
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<td>Faculty Teaching Rounds</td>
<td>Faculty Teaching Rounds</td>
<td>Faculty Teaching Rounds</td>
<td>Patient Care</td>
<td>Follow-up Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth night; weekends free except for on call and review of patient progress each morning.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR: J. Usha Raj, M.D.  PHONE #: (310) 222-1963

SUPPORTING FACULTY: Lynne Smith, M.D., Solomon Laktineh, M.D., Julie Noble, M.D., Virender Rehan, M.D.

STUDENT COORDINATOR: Lisa Payne  PHONE #: (310) 222-2343  E-MAIL: lpayne@labiomed.org

REPORT TO: 6th Floor Lobby Office – 8:00 a.m.

PREREQUISITES: Pediatrics, Medicine, Surgery, Obstetrics/Gynecology

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: Students will be assigned cases in the Level II nursery and will follow them in-house as their primary care provider. They will also perform well baby examinations. They will attend delivery room calls as a member of the team, teaching and work rounds, clinics and conferences. They will be supervised by the resident, fellow, Dr. Noble, and neonatal faculty.

COMMON PROBLEMS/DISEASES
1. Premature infants
2. Neonatal resuscitation
3. Suspected sepsis
4. Mild neonatal lung disease
5. Congenital malformation
6. Bilirubin problems
7. Weight gain in premature infants
8. Hypoglycemia

INPATIENT: 95%
OUTPATIENT: 5%
CONSULTATION: 0%
PRIMARY CARE: 100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 8
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 38

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | OB Case Conference  
Neonatal X-ray Conf.  
Patient Care  
Faculty Attending Rounds | Work Rounds  
Patient Care  
Faculty Attending Rounds | Work Rounds  
Perinatal Case Conf.  
Neonatal X-ray Conf.  
Patient Care | Work Rounds  
Grand Rounds  
Patient Care | Work Rounds  
Chief’s Rounds  
Neonatal X-ray Conf.  
Patient Care |
| PM   | Faculty Teaching Rounds  
Patient Care  
Faculty Attending Rounds  
Patient Care  
Patient Care | Faculty Attending Rounds  
Patient Care  
Patient Care | Faculty Attending Rounds  
Patient Care  
Patient Care | High-Risk Infant Follow-up Clinic |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth night in neonatal ICU; weekends free except for on call and review of patient progress each morning.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: