STUDENT EXPERIENCES

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

COMMON PROBLEMS/DISEASES

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

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

AVAILABLE FOR EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2010-2011 ROTATIONS BEGIN WEEKS:
3, 6, 9, 12, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION: As a sub-intern on the CCU team, the student will work up and participate in the management of patients under the guidance of the internal medicine resident, cardiology fellow and attending physician. Rounds will be made daily except the student will be given three days off during the rotation.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

INPATIENT: 100%
OUTPATIENT: 0%
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: 4 to 8

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

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The sub-intern will be on-call every 5th night. The post-call team will leave by 1 p.m.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME420.01 CRITICAL CARE

Subinternship/Inpatient Location: OVH

Revised: 12/7/09

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

- 100% FULL-TIME FACULTY
- 0% CLINICAL FACULTY
- 0% FELLOWS
- 100% RESIDENTS
- 100% INTERNS

COMMON PROBLEMS/DISEASES

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

4 - 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:

25

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Work Rounds</td>
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<tr>
<td></td>
<td>9:00 - 12:00 Attending Rounds and X-Ray Rounds</td>
<td>9:00 - 12:00 Attending Rounds and X-Ray Rounds</td>
<td>9:00 - 12:00 Attending Rounds and X-Ray Rounds</td>
<td>9:00 - 12:00 Attending Rounds and X-Ray Rounds</td>
<td>9:00 - 12:00 Attending Rounds and X-Ray Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Medicine Noon Conference</td>
<td>12:00 – 1:00 Medicine Noon Conference</td>
<td>12:00 – 1:00 Medicine Noon Conference</td>
<td>12:00 – 1:00 Medicine Noon Conference</td>
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<td>1:00 Critical Care Unit</td>
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</tbody>
</table>

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.

REPORT TO: Olive View Medical Center, Room 2B182 at 8:00 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2010-2011 ROTATIONS BEGIN WEEKS:

3, 6, 9, 12, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45, 48

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.

STUDENT COORDINATOR:

Mark DeVany (818) 364-3205

E-MAIL: mdevany@dhs.lacounty.gov

SUPPORTING FACULTY:

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

COURSE CHAIR:

Dennis Yick, M.D.

PHONE #: (818) 364-3205

E-MAIL:

COURSE OBJECTIVES (in order of importance)

1. To gain knowledge of the pathophysiology and treatment of common critical care conditions including GI bleed, unstable angina, MI, DKA, respiratory failure, sepsis, congestive heart failure, shock, and pneumonia.
2. Learn uses of anti-arrhythmics, vasodilators, pressors.
3. Learn to interpret arterial blood gases, electrolytes, hemodynamic monitoring.
4. To gain procedure skills including arterial lines, central lines, thoracentesis, paracentesis lumbar puncture.
5. To gain experience in managing patients on ventilators.

STUDENT COORDINATOR:

Mark DeVany (818) 364-3205

E-MAIL: mdevany@dhs.lacounty.gov

SUPPORTING FACULTY:

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

COURSE CHAIR:

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2. Learn uses of anti-arrhythmics, vasodilators, pressors.
3. Learn to interpret arterial blood gases, electrolytes, hemodynamic monitoring.
4. To gain procedure skills including arterial lines, central lines, thoracentesis, paracentesis lumbar puncture.
5. To gain experience in managing patients on ventilators.
ME440.01  HEMATOLOGY-ONCOLOGY

Subinternship/Inpatient Location: CS 2010-2011
Revised: 12/8/09

STUDENT EXPERIENCES

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

COMMON PROBLEMS/DISEASES

1. Leukemia
2. Lymphoma
3. Multiple myeloma
4. Neutropenic fever
5. Stem cell transplantation

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>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 10:30 Work Rounds</td>
<td>8:00 – 9:00 Heme. Onc Grand Rounds</td>
<td>8:00 – 10:30 Work Rounds</td>
<td>8:00 – 10:30 Work Rounds</td>
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<td></td>
<td>12:00 – 1:00 Noon Conference</td>
<td>Work Rounds</td>
<td>12:00 Heme/Onc Tumor Board</td>
<td>Work Rounds</td>
<td>8:30 — 9:30 Grand Rounds</td>
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<td>Work Rounds</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>Work Rounds</td>
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<td></td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>3:00 – 5:00 Outpatient Clinic</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
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</table>

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every third night call.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
STUDENT EXPERIENCES

CLOSE CONTACT WITH:

1. FULL-TIME FACULTY
2. CLINICAL FACULTY
3. FELLOWS
4. RESIDENTS
5. INTERNS
6. OTHER:

COMMON PROBLEMS/DISEASES

1. Renal diseases
2. Cerebrovascular disease
3. Respiratory failure
4. Diabetes mellitus
5. Pneumonia
6. Peptic ulcer disease
7. Chronic obstructive pulmonary disease
8. AIDS

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>
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<td>Patient Care Activities</td>
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<td>Patient Care Activities</td>
</tr>
</tbody>
</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:
ME450.02  INTERNAL MEDICINE

Subinternship/Inpatient Location: HARBOR 2010-2011
Revised: 4/15/10

STUDENT EXPERIENCES

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

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

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

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>7:30 – 9:00 Rounds</td>
<td>7:30 – 9:00 Rounds</td>
<td>7:30 – 9:00 Rounds</td>
<td>7:30 – 9:00 Rounds</td>
<td>7:30 – 9:00 Rounds</td>
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<tr>
<td></td>
<td>10:30 – 12:00 Attending Rounds</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>10:30 – 12:00 Attending Rounds</td>
<td>8:30-9:30 Morning Report</td>
<td>10:30 – 12:00 Attending Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 – 1:00 House Staff Lecture Series</td>
<td>New Patient Workups</td>
<td>12:00 – 1:00 Primary Care Conference</td>
<td>New Patient Workups</td>
<td>12:00 – 1:00 Intern Report</td>
</tr>
</tbody>
</table>

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.
ME450.03  INTERNAL MEDICINE

Subinternship/Inpatient Location: ST.MARY 2010-2011

Revised: 12/8/09

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 EXPERIENCES

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

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

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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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<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></td>
<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>
<td>11:30 - Teaching Attending Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 - Noon Conf. Didactic Teaching</td>
<td>12:00 - Noon Conf. Didactic Teaching</td>
<td>12:00 - Noon Conf. Didactic Teaching</td>
<td>12:00 - Noon Conf. Didactic Teaching</td>
<td>12:00 - Noon Conf. Didactic Teaching</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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<td></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>
<td>4:00 - Sign-out rounds Patient Care</td>
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</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. St. Mary Medical Center, 1050 Linden Avenue 887, Long Beach, CA 90801.
COURSE CHAIR: Samuel Burstein, M.D.  
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  

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

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  

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4 - 5  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 13 - 15  

TYPICAL WEEKLY SCHEDULE 

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.
STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Coronary artery disease/CHF
2. COPD and asthma
3. Pneumonia
4. Sepsis
5. GI bleeding
6. Cerebrovascular disease
7. Renal failure
8. AIDS

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: 5

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

TYPICAL WEEKLY SCHEDULE

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: Michael Rotblatt, M.D.  
PHONE #: (818) 364-3205  
E-MAIL: mrotblatt@dhs.lacounty.gov

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

STUDENT COORDINATOR: Mark DeVany  
PHONE #: (818) 364-3205  
E-MAIL: mdevany@dhs.lacounty.gov

REPORT TO: Olive View Medical Center, Dept. of Medicine Office, Room 2B-182 at 8:00 am.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 3 weeks

2010-2011 ROTATIONS BEGIN WEEKS: 3, 6, 9, 12, 15, 18, 21, 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

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

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

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>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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</thead>
</table>
| AM   | 7:00 – 8:00: Preround  
8:00 – 9:00: Resident Rounds  
9:30 – 10:30: Morning Report  
10:30-12:00: Attending Rounds  | 7:00 – 8:00: Preround  
8:00 – 9:00: Resident Rounds  
9:30 – 10:30: Morning Report  
10:30-12:00: Attending Rounds  | 7:00 – 8:00: Preround  
8:00 – 9:00: Resident Rounds  
9:00 – 10:00: Morning Report  
10:00-12:00: Attending Rounds  | 7:00 – 8:00: Preround  
8:00 – 9:00: Resident Rounds  
9:30 – 10:30: Morning Report  
10:30-12:00: Attending Rounds  | 7:00 – 8:00: Preround  
8:00 – 9:00: Resident Rounds  
9:00 – 10:00: Morning Report  
10:00-12:00: Attending Rounds  |
|      | 12:00 – 1:00 Noon Conference  
1:00 – 5:00 Patient Care  | 12:00 – 1:00 Noon Conference  
1:00 – 5:00 Patient Care  | 12:00 – 1:00 Noon Conference  
1:00 – 5:00 Patient Care  | 12:00 – 1:00 Noon Conference  
1:00 – 5:00 Patient Care  |

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.
CLOSE CONTACT WITH:
X FULL-TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Nursing & Hospital Ancillary Staff

COMMON PROBLEMS/DISEASES
1. Cancer
2. Heart Disease
3. Pulmonary Disease
4. Infections
5. G.I. Bleeding
6. Liver Disease
7. Hypertension & Diabetes
8. Altered Mental Status

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 6 - 8
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20 - 30

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: 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.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: 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.
**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>
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<tbody>
<tr>
<td>1. Respiratory failure (COPD, ARDS)</td>
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<tr>
<td>2. Shock (cardiogenic, hemorrhagic, septic)</td>
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<td>3. Drug overdose</td>
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<td>4. Renal failure</td>
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<td>5. Immuno-compromised patients</td>
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<td>6. Multiorgan system dysfunction</td>
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<td>7. Mechanical ventilation</td>
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<tr>
<td>8. Hepatic failure</td>
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</tbody>
</table>

**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>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 8:30 Didactic Conference</td>
<td>8:00 – 8:30 Didactic Conference</td>
<td>8:00 – 11:00 Attending Rounds</td>
<td>8:00 – 8:30 Didactic Conference</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Critical Care Conference</td>
<td>12:00 – 1:00 Pulmonary Clinical Conference</td>
<td>12:00 Psycho Social Conference</td>
<td>1:00 Patient Care</td>
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**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.
ME455.02 MEDICAL INTENSIVE CARE UNIT (MICU)

Subinternship/Inpatient Location: CS 2010-2011
Revised: 11/16/09

STUDENT EXPERIENCES
CLOSE CONTACT WITH:

- 100% FULL-TIME FACULTY
- 0% CLINICAL FACULTY
- 0% FELLOWS
- 100% RESIDENTS
- 0% INTERNS
- 0% OTHER: Pharmacists

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

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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.
ME455.03       RESPIRATORY INTENSIVE CARE

Subinternship/Inpatient Location: CS 2010-2011
Revised: 12/9/09

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

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

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

TYPICAL WEEKLY SCHEDULE

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<td>RICU Teaching Rounds</td>
<td>RICU Core Curriculum</td>
<td>Pulmonary Grand Rounds</td>
<td>RICU Teaching Rounds</td>
<td>Medical Grand Rounds</td>
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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.
COURSE CHAIR:
Bojan Cercek, M.D.
PHONE #: (310) 423-4876
Or (310) 423-3836
E-MAIL: cercek@cshs.org

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 EXTERN: Yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 3 weeks

2010-2011 ROTATIONS BEGIN WEEKS:
6, 9, 12, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION:
Resident/intern teams are on call every third night; subinterns every sixth 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 brief 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
9. Respiratory Insufficiency

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 63 - 75

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>7:30</td>
<td>Clinical pre-rounds with postcall team, fellow/resident/intern</td>
<td>12:00-1:30: EKG course or Noon Medicine Conf. 2:00-3:00: Follow-up of patients</td>
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<tr>
<td>8:00-11:30</td>
<td>Rds w/ attending, bedside rds. Review of studies.</td>
<td>3:00-4:00: Sign-out rds with fellow/attending</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One night in six, including weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
STUDENT EXPERIENCES
CLOSE CONTACT WITH:

<table>
<thead>
<tr>
<th>INPATIENT</th>
<th>OUTPATIENT</th>
<th>CONSULTATION</th>
<th>PRIMARY CARE</th>
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</table>

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

APPORXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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.
STUDENT EXPERIENCES

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

DIFFICULT MANIFESTATIONS

COMMON PROBLEMS/DISEASES

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

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>
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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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<td>PM</td>
<td>12:00 Journal Club</td>
<td>Patient Management</td>
<td>12:00 Medical Grand Rounds</td>
<td>Patient Management</td>
<td>12:00 EKG/Echo/Hemodynamic Conference</td>
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<td>Patient Management</td>
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<td>4:00 Med-Surgery Cath Conf. (optional)</td>
<td>Patient Management</td>
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<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 2010-2011
Revised: 11/18/09

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

COMMON PROBLEMS/DISEASES
1. Respiratory failure
2. Cerebrovascular accidents
3. GI hemorrhage
4. Drug overdoses
5. Sepsis
6. Multi-organ failure
7. Mechanical ventilation
8. Cardiovascular problems

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

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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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:
ME456.01  GERIATRIC MEDICINE

Subinternship/Inpatient Location: WVA  2010-2011

COURSE CHAIR:  
Shawkat Dhanani, M.D.  
PHONE #:  
(310) 268-3036

E-MAIL:

SUPPORTING FACULTY:  

STUDENT COORDINATOR:  
Donna Henriques  
PHONE #:  
(310) 268-3474

E-MAIL: susan.orrange@va.gov

REPORT TO: Bldg. 500, Room 2238 (2 East B), 8:00 a.m. on first day.

PREREQUISITES: None

AVAILABLE FOR EXterns: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION:  3 weeks

2010-2011 ROTATIONS BEGIN WEEKS:  
3, 6, 9, 12, 15, 18, 21, 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

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

COMMON PROBLEMS/DISEASES
1. Arterioslerotic heart disease  
2. Dementia/ Delirium  
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%

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 5 - 7

TYPICAL WEEKLY SCHEDULE

*** SEE UNIT ROTATION SCHEDULE UPTON ARRIVAL AT ELECTIVE ***

<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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</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>
<td>8:00 Work Rounds</td>
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<tr>
<td></td>
<td>10:30 Faculty Teaching Rounds</td>
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<td>10:30 Faculty Teaching Rounds</td>
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<td>10:30 Faculty Teaching Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 Medical Service M &amp; M Conference</td>
<td>3:00: Multicampus Division Clinical Lecture</td>
<td>12:00 Medical Service Grand Rounds</td>
<td>Patient Workups Family Meetings</td>
<td>12:00 Medical Service Lecture Patient Workups</td>
</tr>
<tr>
<td></td>
<td>2:00 Team Meeting</td>
<td>4:00: Multicampus Division Research Seminar/Journal Club</td>
<td>Patient Workups</td>
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</tbody>
</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 associated 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.
STUDENT EXPERIENCES
CLOSE CONTACT WITH:
1. FULL-TIME FACULTY
2. CLINICAL FACULTY
3. FELLOWS
4. RESIDENTS
5. INTERNS
6. OTHER: Respiratory Therapists

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

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

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: 24 hours on for 2–3 shifts/week; work alongside ICU intern. Weekends 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.
ME470.02  PULMONARY DISEASES

Subinternship/Inpatient  Location: WVA  2010-2011  Revised: 5/20/10

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

SUPPORTING FACULTY:  
  Drs. Raj Batra, Steven Dubinett, Guy Soo Hoo, Michael Littner, Michelle Zeidler

STUDENT COORDINATOR:  Gloria Ibes Mejia  PHONE #: (310) 268-3021
  E-MAIL: gloria.mejia@va.gov

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

STUDENT EXPERIENCES

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

COMMON PROBLEMS/DISEASES

<table>
<thead>
<tr>
<th>#</th>
<th>Problem/Disease</th>
<th>INPATIENT: 90%</th>
<th>OUTPATIENT: 10%</th>
<th>CONSULTATION: 100%</th>
<th>PRIMARY CARE: 0%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Acute respiratory failure</td>
<td></td>
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<tr>
<td>2</td>
<td>Lung carcinoma/pulmonary nodule</td>
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<tr>
<td>3</td>
<td>Pneumonias</td>
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<tr>
<td>4</td>
<td>Obstructive airways disease</td>
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<tr>
<td>5</td>
<td>Interstitial lung disease</td>
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<tr>
<td>6</td>
<td>Pleural effusion</td>
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<td>7</td>
<td>Pre- and post-operative evaluations</td>
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<tr>
<td>8</td>
<td>Tuberculosis</td>
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</tbody>
</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4
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>
<tbody>
<tr>
<td>AM</td>
<td>Consults</td>
<td>Consults</td>
<td>8:00 Pulmonary Conf.</td>
<td>Consults/Rounds</td>
<td>Consults</td>
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<td></td>
<td></td>
<td></td>
<td>Consults/Rounds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PM</td>
<td>Consult Rounds</td>
<td>12:00 Pulmonary Conference</td>
<td>Medical Grand Rounds</td>
<td>1:00 - 4:00 Chest Clinic</td>
<td>12:00 Pulmonary Conference</td>
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<tr>
<td></td>
<td></td>
<td>Consult Rounds</td>
<td>1:00 - 4:00 Sleep Disorders Clinic</td>
<td>5:00 Pulmonary Conference</td>
<td>Consult Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

PREREQUISITES: Internal Inpatient Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD:  max 2  min 1

DURATION: 3 weeks

2010-2011 ROTATIONS BEGIN WEEKS:
3, 6, 9, 12, 15, 18, 21, 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

COURSE OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of obstructive airways disease, respiratory failure, pneumonias, infiltrative lung disease, lung carcinoma, etc.
2. Interpretation of chest roentgenograms, pulmonary function tests, arterial blood gases, pleural fluid data, etc.
3. Understanding the indications for bronchoscopy, aspiration lung biopsy, thoracentesis, and pleural biopsy.
4. Knowledge of the pharmacology of bronchodilators and corticosteroids.
5. Understanding the use of mechanical ventilators.
6. Clinical skills: medical interviewing and physical examination.
7. Medical decision making: analysis of medical data and synthesis of information.
ME470.03 PULMONARY

Subinternship/Inpatient Location: OVH 2010-2011
Revised: 11/16/09

STUDENT EXPERIENCES

- Full-time Faculty
- Clinical Faculty
- Fellows
- Residents
- Interns
- Other: Respiratory Therapists

80% 20% 85% 15%

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

<table>
<thead>
<tr>
<th>Hour</th>
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<th>Friday</th>
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<tbody>
<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>
<td>9:00 - 12:00 p.m. Attending Rounds</td>
<td>9:00 - 12:00 p.m. Attending Rounds</td>
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<tr>
<td></td>
<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>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: