COURSE CHAIR:
Timothy Jang, M.D.
PHONE #:
(310) 222-6890

SUPPORTING FACULTY:
Wendy Coates, MD

STUDENT COORDINATOR:
Lucy Hadley
PHONE #:
(310) 222-6881
E-MAIL: lehadley@emedharbor.edu

REPORT TO: Timothy Jang, DEM Administrative Building, D9
at 8:00 AM

PREREQUISITES: Inpatient Internal Medicine & Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 2 Weeks (4 weeks available by arrangement)

2010-2011 ROTATIONS BEGIN WEEKS:
5, 9, 13, 17, 21, 27, 31, 35

DESCRIPTION:
Students will work with Emergency Medicine physicians who use bedside ultrasound in their practice at Harbor-UCLA Department of Emergency Medicine. They will develop cognitive and manual skills necessary to incorporate bedside ultrasound into their practice. They will be required to complete a minimum of 25 ultrasounds. Students will attend formal lectures on ultrasound (theory, image acquisition, and interpretation). In addition, students will receive real time bedside ultrasound teaching. Exams will be required in the following areas: cardiac, gallbladder, trauma/FAST, aorta, and transabdominal/endovaginal. Student will be required to keep an ongoing log of their exams. These will be reviewed by the course chair. A quiz based on required weekly reading material will be given each week. Lastly, students will be required to present a topic in emergency ultrasound at one of the weekly lectures.

COURSE OBJECTIVES (in order of importance)
1. The student will be able to demonstrate knowledge of ultrasound physics, technology, and knobology.
2. The student will be able to outline a strategy for evaluation of patients with the common indications for ultrasound imaging.
3. The student will be able to identify specific anatomic landmarks pertaining to emergent bedside ultrasound.
4. The student will be able to obtain and interpret ultrasound images for the following exams: right upper quadrant, FAST (trauma), obstetric, pericardial fluid, and abdominal aorta.
5. The student will be able to apply bedside ultrasound to make diagnosis and will be able to recommend an appropriate definitive study for inconclusive ultrasound exams.
6. The student will be able to use bedside ultrasound for therapeutic procedures, including paracentesis and central line placement, according to standard emergency medicine practice.

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

COMMON PROBLEMS/DISEASES
1. Undifferentiated abdominal pain
2. Biliary Colic
3. Multiple trauma
4. Vaginal bleeding in the pregnant patient
5. Pericardial effusion
6. Central venous cannulation/access
7. Paracentesis

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 25

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 150-200

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>9:00 – 11:00 Ultrasound Lecture Series Emergency Dept. Ultrasound</td>
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<td>Emergency Dept. Ultrasound</td>
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<td>12 – 4 Formal Ultrasound</td>
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<td>12:00 – 1:00 Library/Research 1:00 – 2:00 Meeting with Mentor</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: 4 week rotations available by arrangement
EM320.01  EMERGENCY MEDICINE

Subinternship  Location: UCLA/OVH  2010-2011  Revised: 11/17/09

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
Larry J. Baraff, M.D.  (310) 794-0580  1.  First hour management of medical and surgical emergen-
E-MAIL:  lbaraff@mednet.ucla.edu  cies.

SUPPORTING FACULTY:  CLOSE CONTACT WITH:
UCLA and Olive View Emergency Medicine Faculty  X  FULL-TIME FACULTY

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

REPORT TO:  X  FELLOWS
Attending Physician, EMC Central Work Area at UCLA, 8:00 a.m.

PREREQUISITES:  X  RESIDENTS
Surgery, Medicine, OB/Gyn and Pediatrics

AVAILABLE FOR EXTERNS:  INTERNS
Yes

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  INPATIENT:  0%
1. Major & Minor Trauma  OUTPATIENT:  100%
2. Cardiac Emergencies: Chest Pain  CONSULTATION:  0%
3. Acute Respiratory Distress  PRIMARY CARE:  100%
4. Acute Febrile Illness  PRIMARY CARE
5. Toxicology
6. Altered Mental Status
7. Abdominal Pain & Ob/Gyn Emergencies
8. Suturing Techniques

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

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

TYPICAL WEEKLY SCHEDULE

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

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

Subinternship Location: HARBOR 2010-2011
Revised: 4/27/10

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

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

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

TYPICAL WEEKLY SCHEDULE

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: *Students may choose to do 3 weeks or 4 weeks during this time period.
EM320.03  EMERGENCY MEDICINE

Subinternship Location: ST. MARY 2010-2011  Revised: 12/7/09

COURSE CHAIR:  
Drs. C. Choi and B. Heller  
PHONE #: (562) 491-9350  
E-MAIL: cchoi@chw.edu

SUPPORTING FACULTY:  
Emergency Room Staff

STUDENT EXPERIENCES

CLOSE CONTACT WITH:

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

COMMON PROBLEMS/DISEASES
1. Major and minor trauma  
2. Acute cardiac emergencies  
3. Pulmonary edema  
4. Acute respiratory emergencies  
5. Orthopedic emergencies  
6. Acute surgical abdomen  
7. Complications of alcoholism  
8. Upper gastrointestinal hemorrhage

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  75
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  650

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Five 8-hour shifts each week.

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

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

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

COURSE OBJECTIVES (in order of importance)

1. Learn the initial evaluation and management of common conditions seen in emergency medicine including major and minor trauma, acute cardiac emergencies, acute respiratory failure, community acquired pneumonia, upper gastrointestinal hemorrhage, complications of alcoholism, acute surgical abdominal processes, and congestive heart failure.
2. Become aware of evidence-based algorithms in emergency medicine that guide quality care and cost-effectiveness. These may be taught through individual case discussions with the EM attending or by directed literature review.
3. Improve their procedural skills in processes such as suturing, ACLS, endotracheal intubation, and intravenous catheter placement under the guidance and observation of the attending physician.
4. Improve their history and physical examination skills and patient-physician communication through guidance, review, and role modeling by the attending physician.
5. Become familiar with the inter-related roles of members of the emergency medicine health care team, including paramedics, nurses and other health care workers, and physicians.
EMERGENCY MEDICINE SUBINTERNSHIP

Subinternship Location: KERN

COURSE CHAIR: Manish Amin, D.O. 
PHONE #: (661) 326-2160
E-MAIL: deidos@pol.net

SUPPORTING FACULTY: 
Drs. Purcell, Dong, Sverchek, McPheeters, Heer, Winter, Michaelson, Amin, Tobias, and Walsh

STUDENT COORDINATOR: Sonya Barnard 
PHONE #: (661) 326-2168
E-MAIL: barnards@kernmedctr.com

REPORT TO: 
Emergency Dept./Kern Med. Ctr., Bakersfield, CA at 8:00 a.m.

PREREQUISITES: Medicine, Surgery, Pediatrics & OB/Gyn

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

2010-2011 ROTATIONS BEGIN WEEKS: By Arrangement

DESCRIPTION: Clinical exposure in the ED of a receiving county hospital/trauma center. Student responsible for initial H&P and management under senior resident and faculty supervision. Patients are unselected; all emergencies represented.

STUDENT EXPERIENCES

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

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

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

TYPICAL WEEKLY SCHEDULE

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

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

Location: WVA  2010-2011

Revised: 11/17/09

STUDENT EXPERIENCES

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

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

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

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

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