ME410.01 CARDIOLOGY

Subinternship/Inpatient **Location: UCLA** **2010-2011**
Revised: 4/27/10

COURSE CHAIR: **PHONE #:**
Henry Honda, M.D. (310) 794-9736
E-MAIL:

SUPPORTING FACULTY:
Drs. Jan Tillisch, James Weiss, Joshua Goldhaber, Robb MacLellan, Jamil AboulHosn, Arnold Baas, David Chang and faculty members of the Division

STUDENT COORDINATOR: **PHONE #:**
Stella Tripp (310) 794-9736
E-MAIL: stripp@mednet.ucla.edu

REPORT TO: Ronald Reagan UCLA Medical Center CCU (7th floor) at 7:45 a.m.

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

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

COURSE OBJECTIVES (in order of importance)

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

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

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

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

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30-8:00 EKG review; 8:30-9:00 Transplant rounds 9:00-10:30 Attending rounds	7:30-8:00 Imaging (CXR, echo, nuclear, angio) review; 8:30-9:00 Transplant rounds 9:00-10:30 Attending rounds	7:30-8:00 EKG review; 8:30-9:00 Transplant rounds 9:00-10:30 Attending rounds	7:30-8:00 Imaging review; 8:30-9:00 Transplant rounds 9:00-10:30 Attending rounds	730-800 EKG review; 8:30-9:00 Transplant rounds 9:00-10:30 Attending rounds
PM	12:00 – 1:00 Internal Medicine Conference	5:00 – 6:00 Cath. Conference 3102 RRUCLA	12:00 – 1:00 Cardiology Fellows Teaching Conference MRL 3248	12:00 – 1:00 Cardiology Fellows Teaching Conference 8234 RRUCLA	12:00 – 1:00 Grand Rounds Rounds 8234 RRUCLA

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

ME420.01 CRITICAL CARE

Subinternship/Inpatient **Location: OVH** **2010-2011 Revised: 12/7/09**

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

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

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

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

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, elecrolytes, 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.

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 EXPERIENCES

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

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

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

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

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 - 9:00 Work Rounds 9:00 - 12:00 Attending Rounds and X-Ray Rounds	8:00 - 9:00 Work Rounds 9:00 - 12:00 Attending Rounds and X-Ray Rounds	8:00 - 9:00 Work Rounds 9:00 - 12:00 Attending Rounds and X-Ray Rounds	8:00 - 9:00 Work Rounds 9:00 - 12:00 Attending Rounds and X-Ray Rounds	8:00 - 9:00 Work Rounds 9:00 - 12:00 Attending Rounds and X-Ray Rounds
PM	12:00 – 1:00 Medicine Noon Conference 1:00 Critical Care Unit	12:00 – 1:00 Medicine Noon Conference 1:00 Critical Care Unit	12:00 – 1:00 Medicine Noon Conference 1:00 Critical Care Unit	12:00 – 1:00 Medicine Noon Conference 1:00 Critical Care Unit	12:00 – 1:00 Medicine Noon Conference 1:00 Critical Care Unit

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:

ME440.01 HEMATOLOGY-ONCOLOGY

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

COURSE CHAIR: **PHONE #:**
Stephen Lim, M.D. (310) 423-1160
E-MAIL:

SUPPORTING FACULTY:
Dr. Michael Lil
Dr. Angela Lopez
Dr. Amir Steinberg

STUDENT COORDINATOR: **PHONE #:**
Judy Jacobs (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.

COURSE OBJECTIVES (in order of importance)
1. Learn how to evaluate patients with malignancies.
2. Management of oncologic and hematologic disorders.
3. Management of therapy related complications.
4. Evaluation and management of internal medicine problems in cancer patients.
5. Management of psychological aspects of neoplastic disorders.
6. Management of terminal illness-palliative care.
7. Management of bone marrow transplant patients.
8. Management of neutropenic fevers.

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Leukemia
2. Lymphoma
3. Multiple myeloma
4. Neutropenic fever
5. Stem cell transplantation

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 – 10:30 Work Rounds	8:00 – 9:00 Heme. Onc Grand Rounds	8:00 – 10:30 Work Rounds	8:00 – 10:30 Work Rounds	8:00 – 8:30 Work Rounds 8:30 –- 9:30 Grand Rounds
PM	12:00 – 1:00 Noon Conference Work Rounds 2:00 – 3:00 Hem./Onc. Lectures	Work Rounds 2:00 – 3:00 Hem./Onc. Lectures 3:00 – 5:00 Outpatient Clinic	12:00 Heme/Onc Tumor Board 2:00 – 3:00 Hem./Onc. Lectures 2:00 – 3:00 Outpatient Clinic	Work Rounds 2:00 – 3:00 Hem./Onc. Lectures	Work Rounds

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

ME450.01 INTERNAL MEDICINE

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

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

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

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

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 3 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. History and physical examination.
2. Medical judgment: analysis of medical data and synthesis of information.
3. Interpretation of tests (e.g., serum electrolytes).
4. Oral presentations.
5. Knowledge of diagnosis and management of complex in-patient problems (e.g., respiratory insufficiency, renal insufficiency).
6. Knowledge of drugs: diuretics, digoxin, antibiotics, steroids, brochodilators.
7. Knowledge of cerebrovascular disease, renal failure, diabetes, collagen vascular disorders, pneumonias, peptic ulcer disease, chronic obstructive pulmonary disease, AIDS.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 Morning Report 9:00 Work Rounds 10:00 Attending Rounds	8:00 Morning Report 9:00 Work Rounds 10:00 Attending Rounds	8:00 Morning Report 9:00 Work Rounds 10:00 Attending Rounds	8:00 Morning Report 9:00 Work Rounds 10:00 Attending Rounds	8:30 Grand Rounds 9:00 Work Rounds 10:00 Attending Rounds
PM	12:00 Medicine Conference 1:00 – 6:00 Patient Care Activities	12:00 Medicine Conference 1:00 – 6:00 Patient Care Activities	12:00 Medicine Conference 1:00 – 6:00 Patient Care Activities	12:00 Medicine Conference 1:00 – 6:00 Patient Care Activities	12:00 Medicine Conference 1:00 – 6:00 Patient Care Activities

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**

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

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

STUDENT COORDINATOR: **PHONE #:**
(310) 222-2409
E-MAIL:

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 4 **min** 0

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)
1. Proficiency in history taking and physical examination.
2. Differential diagnosis of common presenting complaints.
3. Knowledge of the natural history of disease.
4. Medical management of common problems.
5. Recognition and therapy of medical emergencies.
6. Indications and interpretations of commonly ordered tests.
7. Proficiency with medical procedures such as nasogastric tube placement, venipuncture, lumbar puncture, thoracentesis, paracentesis, etc.
8. Medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).
9. Oral presentations of clinical cases.
10. Team approach and utilization of allied health personnel.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30 – 9:00 Rounds 10:30 – 12:00 Attending Rounds	7:30 – 9:00 Rounds 8:30 – 9:30 Medical Grand Rounds	7:30 – 9:00 Rounds 10:30 – 12:00 Attending Rounds	7:30 – 9:00 Rounds 8:30-9:30 Morning Report	7:30 – 9:00 Rounds 10:30 – 12:00 Attending Rounds
PM	12:00 – 1:00 House Staff Lecture Series New Patient Workups	New Patient Workups	12:00 – 1:00 Primary Care Conference New Patient Workups	12:00 – 1:00 Mortality and Morbidity Conference New Patient Workups	12:00 – 1:00 Intern Report New Patient Workups

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

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

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

REPORT TO: Sylvia Perez, 9AM. Department of Medical Education, 3 West, 1050 Linden Ave., Long Beach, CA 90813

PREREQUISITES: 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

COURSE OBJECTIVES (in order of importance)
1. Improve clinical skills
2. Improve evidence based medical decision making ability
3. Develop proficiency in the interpretation of diagnostic tests
4. Improve knowledge base in clinical pharmacology
5. Learn how to provide effective medical consultations to non-medical services

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 - Morning Report 9:30 - Work Rounds w/ Residents 11:30 - Teaching Attending Rounds	8:00 - Intern/student Morning Report 9:30 - Work Rounds w/ Residents 11:30 - Work Round w/ Residents	8:00 - Morning Report & Radiology Conference 9:30 - Work Rounds w/ Residents 11:30 - Teaching Attending Rounds	8:00 - Medical Clinic 9:30 - 12:00 Work Rounds w/ Residents	8:00 - Intern/student Morning Report 9:30 - Work Rounds w/Residents 11:30 - Teaching Attending Rounds
PM	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 4:00 - Sign-out rounds Patient Care

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.

ME450.04 INPATIENT MEDICINE

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

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

SUPPORTING FACULTY:
Samuel Burstein, M.D.

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

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 5 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. Diagnosis, understanding and management of diseases (cardiac, pulmonary, infectious, gastrointestinal, renal), and metabolic disturbances, either singly or in a multisystem fashion, inclusive of most internal medicine and subspecialities.
2. Improved history and physical techniques, stressing the ability to focus and prioritize.
3. Diagnosis and management of complex in-patient problems.
4. Development of oral presentation skills in a conference setting.
5. Improving doctor-patient relationships.
6. 6Team approach and utilization of allied health personnel.
7. Test utilization and interpretation, including LFTs, serologies, ABGs, electrolytes, PFTs, and critical parameters of cardiopulmonary and renal function.
8. Pharmacology of cardiac drugs, antihypertensives, antibiotics, anti-neoplastics, and anti-inflammatory drugs.
9. Evaluation of the acutely ill patient in the Emergency Room.
10. Socioeconomic aspects of medical care, e.g., cost-containment and the limits of medical care.

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

STUDENT EXPERIENCES

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

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

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

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

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30 - Ward Rounds 8:30 - Case Conference 9:00 - Morning Report 10:00 - Attending Rounds	7:30 - Ward Rounds 8:30 - Case Conference 9:00 - Morning Report 10:00 - Attending Rounds	7:30 - Ward Rounds 9:00 - Morning Report 10:00 - Attending Rounds	7:30 - Ward Rounds 8:30 - Case Conference 9:00 - Morning Report 10:00 - Attending Rounds	7:30 - Ward Rounds 8:30 - Case Conference 9:00 - Morning Report 10:00 - Attending Rounds
PM	Noon Conference 1:00 - Patient Management Subspecialty Lectures	Interns Case Conference 1:00 - Patient Management	Medical Grand Rounds 1:00 - Patient Management	Journal Club/Other 1:00 - Patient Management	Noon Conference 1:00 - Patient Management

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.

ME450.05 INTERNAL MEDICINE

Advanced Clinical Clerkship | **Location: KDMC** | **2010-2011 Revised: 12/9/09**

COURSE CHAIR: Peter Chee, M.D. **PHONE #:** (323) 783-4892
E-MAIL:

SUPPORTING FACULTY:
The staff of the Department of Internal Medicine

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

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR 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

COURSE OBJECTIVES (in order of importance)
1. Broaden medical knowledge base.
2. Refine history, physical exam, and case presentation skills.
3. Manage and obtain experience in the diagnosis of common and complex inpatient medical problems.
4. Participate in a prepaid health care system.
5. Learn about cost effectiveness and preventative medicine.
6. Learn about the importance of the doctor-patient relationship in patient management.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 - Work Rounds 10:00 - Attending Rounds	8:00 - Morning Report 10:00 - Attending Rounds	8:00 - Morning Report 10:00 - Attending Rounds	8:00 - Morning Report 10:00 - Attending Rounds	8:00 - Morning Report 10:00 - Attending Rounds
PM	12:30 - Hematology/ Renal Conference 1:30 - Patient Care	2:00 - Internal Medicine Education Conference (Grand Rounds) 3 Hrs.	12:30 - Cardio Conf 1:30 - EKG Conference 2:30 - Patient Care	12:30 - Id/Onc Conf. 1:30 - Patient Care	12:30 - GI Conf. 1:30 - Patient Care

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.

ME450.06 GENERAL INTERNAL MEDICINE

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

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

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

STUDENT COORDINATOR: **PHONE #:**
Mark DeVany (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

COURSE OBJECTIVES (in order of importance)

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

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

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: 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

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
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 10-12:00: 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
PM	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	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.

ME452.01 INPATIENT MEDICINE

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

COURSE CHAIR: **PHONE #:**
Neil H. Parker, M.D. (310) 825-6774
E-MAIL: nparker@ucla.edu

SUPPORTING FACULTY:
Alan Fogelman, M.D., Chief of Service, UCLA, and Staff

STUDENT COORDINATOR: **PHONE #:**
Jonathan David (310) 794-3563
E-MAIL: jdavid@mednet.ucla.edu

REPORT TO: Chief Resident, between 8 and 8:10 a.m., 7236 Ronald Reagan UCLA Med. Ctr. For Morning Report

PREREQUISITES: Third-year inpatient Medicine, Surgery, Pediatrics, Ob/Gyn, Neurology, and Psychiatry

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 5 **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

COURSE OBJECTIVES (in order of importance)

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

DESCRIPTION: Students will function as subinterns under the guidance of the resident and attending physicians, doing work-up of patients in rotation with two interns on a general medicine team. Attending rounds are daily with teaching sessions, depending on the ward assignment. The five general medicine teams work as a firm with a group of attendings and residents. Teams admit on schedule which takes into account the ACGME requirements. There is a need to work within a team system. Sub I should make every effort to attend Morning Reports and present their patients. X-rays, lab results, and slides should be reviewed on rounds. The six core ACGME competencies are stressed on the rotation.

STUDENT EXPERIENCES

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

INPATIENT:	100%
OUTPATIENT:	00%
CONSULTATION:	0%
PRIMARY CARE:	100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 6 - 8

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20 - 30

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30 – 8:30: Prerounds 8:30 – 9:30: Morning Report 9:30 – 10:30: Resident Work Rds 10:00 – 12:00: Attending Rds	7:30 – 8:30: Prerounds 8:30 – 9:30: Morning Report 9:30 – 10:30: Resident Work Rds 10:00 – 12:00: Attending Rds	7:30 – 8:30 Prerounds 8:30 – 9:30 Grand Rounds 11:15 – 12:00 Discharge Planning Rounds	7:30 – 8:30: Prerounds 8:30 – 9:30: Morning Report 9:30 – 10:30: Resident Work Rds 10:00 – 12:00: Attending Rds	7:30 – 8:30: Prerounds 8:30 – 9:30: Morning Report 9:30 – 10:30: Resident Work Rds 10:00 – 12:00: Attending Rds
PM	12:00 – 1:00 GIM Noon Conf. 1:00 Patient Care	12:00 – 1:00 Noon Conf. 1:00 Patient Care	1:00 Patient Care	12:00 – 1:00 Noon Conf. 1:00 Patient Care	12:00 – 1:00 Noon Conf. 1:00 Patient Care

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.

ME455.01 MEDICAL INTENSIVE CARE UNIT (MICU)

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

COURSE CHAIR: **PHONE #:**
Rajan Saggar, M.D. (310) 825-5635
FAX:
E-MAIL:

SUPPORTING FACULTY:
Pulmonary & Critical Care Faculty

STUDENT COORDINATOR: **PHONE #:**
Heather Draper (310) 825-5615
FAX:
E-MAIL: hdraper@mednet.ucla.edu

REPORT TO: Pulmonary/Critical Care Attending, MICU-4West, UCLA Med. Ctr. 7:45 a.m.

PREREQUISITES: 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

COURSE OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis, natural history, diagnosis, and management of common medical emergencies such as respiratory failure shock, GI hemorrhage, drug overdose, renal failure, coma, etc.
2. Interpretation of blood gases, EKGs, chest radiographs, hemodynamic parameters, etc.
3. Knowledge of the clinical pharmacology of bronchodilators, cardiovascular drugs, oxygen, antibiotics, etc.
4. Knowledge of the use of mechanical ventilators and other aspects of respiratory therapy.
5. Knowledge of nutrition and metabolism in the critically ill, including prescription of nutritional supplementation.
6. Performance of arterial punctures and catheterization, airway adjuncts, O2 titration, weaning, etc.
7. Improved history, physical exam, and medical record keeping.
8. Interaction with a multidisciplinary critical care team.
9. Knowledge of the indications for and benefits of ICU care, including medical decision making based on ethical, legal, and cost-containment factors.

DESCRIPTION: This elective provides an excellent opportunity to learn about and manage critically ill adults, many of whom have multiorgan system dysfunction. In addition, the psychosocial aspects of patient/family/ICU staff interrelationships are emphasized, as are the ethical, moral, and legal dimensions of critical care. The student is responsible for initial primary work-ups & continued management of ICU patients under the resident's supervision. A core curriculum of critical care topics is covered EACH WEEK in seminars presented by the ICU Fellow and Attending.

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 – 8:30 Didactic Conference 8:45 – 11:00 Attending Rounds	8:00 – 8:30 Didactic Conference 8:45 – 11:00 Attending Rounds	8:00 – 11:00 Attending Rounds	8:00 – 8:30 Didactic Conference 8:45 – 11:00 Attending Rounds	8:00 – 11:00 Attending Rounds
PM	12:00 – 1:00 Critical Care Conference 1:00 Patient Care	12:00 – 1:00 Pulmonary Clinical Conference 1:00 Patient Care	12:00 Psycho Social Conference 1:00 Patient Care	1:00 Patient Care	1:00 Patient Care

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**

COURSE CHAIR: **PHONE #:**
Lawrence Maldonado, M.D. (310) 423-3836
E-MAIL:

SUPPORTING FACULTY:
Drs. Mark Ault, Philip Ng, Dani Hackner, and Claude Killu

STUDENT COORDINATOR: **PHONE #:**
Judy Jacobs (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

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

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 **min** 1

DURATION: 3 **weeks**

2010-2011 ROTATIONS BEGIN WEEKS:
9, 13, 15, 18, 21, 27, 30, 33, 36, 39, 42, 45, 48 (June through August by arrangement)

DESCRIPTION: The Cedars-Sinai MICU is a 10 bed critical care facility that is fully equipped for hemodynamic monitoring, dialysis, and respiratory support. Students are expected to be knowledgeable in medicine, obstetrics, surgery, and physiology and to have a major interest in the medical management of the critically ill.

STUDENT EXPERIENCES

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 inbalance

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3 - 5

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30 Work Rounds 9:00: MICU Work Rds 10:30: X-Ray Conf. MICU 11:00 MICU Case Presentations	7:30 Work Rounds 9:00: MICU Work Rds 10:30: X-Ray Conf. MICU 11:00 MICU Case Presentations	7:30 Work Rounds 9:00: MICU Work Rds 10:30: X-Ray Conf. MICU 11:00 MICU Case Presentations	7:30 Work Rounds 8:00 A P.G. 9:00: MICU Work Rds 10:30: X-Ray Conf. MICU 11:00 MICU Case Presentations	7:30 Work Rounds 9:00: MICU Work Rds 10:30: X-Ray Conf. MICU 11:00 MICU Case Presentations
PM	12:00: Dept. of Med Conf. 3:30: Core Curriculum 4:30: MICU Sign-out Rounds	12:00: Dept. of Med Conf. 3:30: Core Curriculum 4:30: MICU Sign-out Rounds	12:00: Dept. of Med Conf. 3:30: Core Curriculum 4:30: MICU Sign-out Rounds	12:00: Dept. of Med Conf. 3:30: Core Curriculum 4:30: MICU Sign-out Rounds	12:00: Dept. of Med Conf. 3:30: Core Curriculum 4:30: MICU Sign-out Rounds

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**

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

SUPPORTING FACULTY:
Zab Mohsenifar, M.D., David Balfe, M.D., Jeremy Falk, M.D., Heather Jones, M.D., George Chaux, M.D.

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

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

PREREQUISITES: Medicine and Surgery entire 3rd year core clerkship

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. Diagnosis and management of chronic obstructive pulmonary disease (COPD), status asthmaticus, acute respiratory distress syndrome (ARDS), pneumonia, pulmonary emboli, septic shock, pulmonary complications of AIDS, chronic interstitial lung disease, and carcinoma of the lung. Medical judgment in the analysis and synthesis of pulmonary medicine and medical information.
2. Demonstration and utility of relevant clinical diagnostic skills in pulmonary critical care.
3. Application of respiratory-physiology to the diagnosis and management of respiratory failure. Extensive respiratory care unit experience. Special emphasis on heart-lung interaction.
4. Knowledge of the pharmacology of respiratory drugs, including adrenergic bronchodilators, cardiovascular drugs and oxygen.
5. Introduction of chest x-ray, CT scans, lung scans, pulmonary function, tests, arterial blood gases, and hemodynamic measurements.
6. Medical ethics, especially regarding intensive care.
7. Rational decision making.
8. 8Use of ventilators, Swan-Ganz catheters, arterial catheters.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	9:30 – 12:00 RICU Teaching Rounds	9:30 –11:00 RICU Teaching Rounds 11:00 – 12:00 RICU Core Curriculum	8:00 – 9:00 Pulmonary Grand Rounds 9:30 – 12:00 RICU Teaching Rounds	9:30 –11:00 RICU Teaching Rounds 11:00 – 12:00 RICU Core Curriculum	8:30 – 9:30 Medical Grand Rounds 9:30 – 12:00 RICU Teaching Rounds
PM	4:30 – 5:00 Sign-out Rounds	4:30 – 5:00 Sign-out Rounds	4:30 – 5:00 Sign-out Rounds	4:30 – 5:00 Sign-out Rounds	12:00 – 1:00 Critical Care Conference 4:30 - 5:00 Sign-out Rounds

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.

ME455.04 CARDIAC INTENSIVE CARE UNIT

Subinternship/Inpatient **Location: CS** **2010-2011 Revised: 11/18/09**

COURSE CHAIR: **PHONE #:**
Bojan Cercek, M.D. (310) 423-4876
Or (310) 423-3836

E-MAIL: cercek@cshs.org

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

STUDENT COORDINATOR: **PHONE #:**
Judy Jacobs (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.

COURSE OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of cardiac disease, principally ischemic, but including other types as well, hemodynamic unstability, respiratory insufficiency.
2. Clinical skills: medical interviewing and physical examination.
3. Medical decision making: analysis of medical data and synthesis of information.
4. Special skills, including emphasis on EKG reading.
5. Diagnosis and management of complex inpatient problems.
6. Specialized CCU patient case.
7. Oral presentation of clinical cases.

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

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

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

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

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

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

TYPICAL WEEKLY SCHEDULE

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

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

ME455.05 MEDICAL/PULMONARY INTENSIVE CARE

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

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

SUPPORTING FACULTY:
Drs. Raj Batra, Steve Dubinett, Silverio Santiago, Michelle Zeidler, Gina Lee, Tisha Wang

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

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 4 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. Rapid evaluation and assessment of the critically ill patient and prompt initiation of appropriate diagnostic and therapeutic maneuvers.
2. Diagnosis and management of cardiac disease, pulmonary disease, infectious disease, gastrointestinal disease, renal disease, and metabolic disturbances, either singly or in a multisystem fashion.
3. Indications and utilization of mechanical ventilation
4. Indications, applications, and utilization of invasive monitoring, including pulmonary-artery catherization.
5. Arterial blood gas analysis and interpretation of mixed metabolic disturbances.
6. Understanding the rational use of pressors, inotropes, antibiotics, anti-arrthymics, oxygen, steroids, etc., in the critically ill patient.
7. Appreciation of the team approach to the critically ill patient.
8. Appreciation of the ethical considerations involved in life-threatening illness and delivery of medical care in the intensive care unit.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 Unit Rounds 8:30 Attending Rds 9:00 – 9:30 X-Ray Rounds	8:00 - Unit Rounds 8:30 Attending Rounds 9:00 – 9:30 X-Ray Rounds 11:30 - ICU Lecture	8:00 - Unit Rounds 9:00 – 9:30 X-Ray Rounds 9:30 - Attending Rounds	8:00 - Unit Rounds 8:30 - Attending Rds 9:00 – 9:30: X-Ray Rounds	8:00 - Unit Rounds 8:30 - Attending Rds 9:00 - 9:30 X-Ray Rds 11:30 - ICU Lecture
PM	Noon Conference Patient Management	Intern Case Conf. Patient Management	Medical Grand Rnds Patient Management	Noon Conference Patient Management	Noon Conference Patient Management

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 groundwordk 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.

ME455.06 CARDIAC INTENSIVE CARE

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

COURSE CHAIR: **PHONE #:**
Jesse Currier, M.D. (310) 268-3643
E-MAIL:

SUPPORTING FACULTY:
Drs. Bersohn, Chang, Currier, Ebrahimi, Feliciano, Han, Mody, Rubin, Shapiro, and Warner.

STUDENT COORDINATOR: **PHONE #:**
Shayne West (310) 478-3711 ext. 83839
E-MAIL: Shayne.west@va.gov

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

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

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:45 Work Rounds 9:00 CCU Rounds	7:45 Work Rounds 9:00 CCU Rounds	7:45 Work Rounds 8:00 Fellow Core Curriculum 9:00 CCU Rounds	7:45 Work Rounds 9:00 CCU Rounds	7:45 Work Rounds 9:00 CCU Rounds
PM	12:00 Journal Club Patient Management 2:00 Nuclear Cardiology Reading	Patient Management	12:00 Medical Grand Rounds Patient Management	Patient Management 4:00 Med-Surgery Cath Conf. (optional).	12:00 EKG/Echo/ Hemodynamic Conference Patient Management

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**

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

SUPPORTING FACULTY:
Critical Care/Pulmonary Medicine Faculty

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

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

PREREQUISITES: Inpatient Internal Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 **min** 1

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. Gain an understanding of the pathogenesis and pathophysiology of common medical problems in the intensive care setting
2. Understand work-up and treatment of problems such as Respiratory Failure, ARDS, Shock, Sepsis, GI Bleed, Coma, Drug Overdose, Electrolyte Disorders, etc.
3. Manage patients on ventilators and on hemodynamic monitors
4. Develop clinical skills: history taking, physical examination and synthesis of data (labs, EKG, CXR, hemodynamic measurements, blood gases, etc).
5. Present oral cases to faculty
6. Learn decision making based upon evidence based medicine and medical ethics

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
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%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 16

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds 12:30 -1:30 Multi-disc.nary Rds (Pulmonary, MICU, Thoracic Surgery) 1:30-3:00 Work Rds 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rds/ Sign-out Rounds	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds
PM	1:00 - 3:00 Work Rounds 3:00 - 4:00 Didactic session 4:00 - 5:00 Work rounds/sign-out rounds	1:00 - 5:00 Work Rounds/Sign-Out Rounds		1:00 - 5:00 Work Rounds/Sign-out Rounds	1:00 - 3:00 Work Rounds 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rounds/Sign-Out Rounds

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 Revised: 11/16/09**

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

SUPPORTING FACULTY:
M. Cantrell, T. Hahn, D. Norman, C. Lee, C. Sarzkisian, D. Ganz, J. Chodash, C. Castle, T.Yoshikawa

STUDENT COORDINATOR: **PHONE #:**
Donna Henriques (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

COURSE OBJECTIVES (in order of importance)

1. To be able to recall etiology of dementia, urinary incontinence; activities of daily living. Analysis of neuropsychological testing in memory impairment, indications for medications vs. potential for adverse drug events vs. application of disease management clinical guidelines. Synthesize and plan for approach to common geriatric syndromes (memory loss, weight loss, loss of function, urinary incontinence, falls, etc.)
2. To be able to demonstrate competency in comprehensive geriatric assessment (history of multiple medical problems, social support and functional assesement, cognition, mood assessment, gait and balance evaluation, etc.). Demonstrate effective interaction in interdisciplinary team meetings and gain insight into how to extract knowledge from other disciplines and how to utilize their skills and focus team members on care plan goals and timeframe. Demonstrate effective communication of care plan, expectations.
3. Open to understanding distinctions between geriatric care and usual medical care of older adults, as well as show understanding, respect, a positive attitutude and an understanding for the health and goals of geriatric patients.

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

STUDENT EXPERIENCES

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

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

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

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

TYPICAL WEEKLY SCHEDULE
***** SEE UNIT ROTATION SCHEDULE UPON ARRIVAL AT ELECTIVE *****

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	8:00 Work Rounds 10:30 Faculty Teaching Rounds	8:00 Work Rounds	8:00 Work Rounds Geriatric Topic Session 10:30 Faculty Teaching Rounds	8:00 Work Rounds	8:00 Work Rounds Geriatric Topic Session 10:30 Faculty Teaching Rounds
PM	12:00 Medical Service M & M Conference 2:00 Team Meeting	3:00: Multicampus Division Clinical Lecture 4:00: Multicampus Division Research Seminar/Journal Club	12:00 Medical Service Grand Rounds Patient Workups	Patient Workups Family Meetings	12:00 Medical Service Lecture Patient Workups

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.

ME470.01 MEDICAL RESPIRATORY ICU

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

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

SUPPORTING FACULTY:
Drs. Gregory Mason, Kathy Sietsema, William Stringer, David Hsia and Janine Vintch

STUDENT COORDINATOR: **PHONE #:**
Kathleen McGinley (310) 222-2409
E-MAIL: kmcginley@dhs.lacounty.gov

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

PREREQUISITES: Medicine and Surgery

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 **min** 0

DURATION: 3 **weeks**

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

COURSE OBJECTIVES (in order of importance)

1. Diagnosis and management of complex inpatient problems such as acute respiratory failure, renal failure electrolyte disorders, GI bleeding, and sepsis.
2. Knowledge of pathogenesis, natural history and evaluation of respiratory failure, and the multisytem problems of critically ill patients.
3. Interpretations of arterial blood gases, electrolytes, EKG, chest x-rays, and hemodynamic data.
4. Indications and use of pulmonary artery catheters, mechanical ventilators, and monitoring systems.
5. Medical judgment, analysis of medical data, and synthesis of information.
6. Knowledge of bronchodilators, vasoactive drugs, and antibiotics.
7. Consideration of cost effective approach to intensive care.
8. Consideration of ethical issues in life-support and other decisions.
9. Delivery of concise, acute oral presentation.

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

STUDENT EXPERIENCES

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

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: Respiratory Therapists

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	7:30 Attending Rounds	8:30 Medical Grand Rounds Attending Rounds	7:30 Attending Rounds Clinical Conference Chest Conference	7:30 Attending Rounds 9:00 ICU Topic Session Dietitian Rounds	7:30 Attending Rounds 9:00 ICU Topic Session
PM	12:00 Medicine Lecture Work Rounds	Work Rounds	Work Rounds	12:00 Medical M&M Conference Work Rounds	Work Rounds

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

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

STUDENT COORDINATOR: **PHONE #:**
Gloria Ibes Mejia (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.

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.

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

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Consults	Consults	8:00 Pulmonary Conf. Consults/Rounds	Consults/Rounds	Consults
PM	Consult Rounds	12:00 Pulmonary Conference Consult Rounds	Medical Grand Rounds 1:00 - 4:00 Sleep Disorders Clinic	1:00 - 4:00 Chest Clinic 5:00 Pulmonary Conference	12:00 Pulmonary Conference Consult Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

ME470.03 PULMONARY

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

COURSE CHAIR: **PHONE #:**
Jeanne Wallace, M.D. (818) 364-3205
E-MAIL:

SUPPORTING FACULTY:
Drs. Janet Au, Jeanne Wallace, Dennis Yick, Nader Kamangar, and Greg Bierer

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

REPORT TO: Mark DeVany, OVMC, Rm. 2B-182.

COURSE OBJECTIVES (in order of importance)
1. To understand the physiologic and genetic basis of respiratory disease and respiratory failure.
2. To obtain experience in the evaluation and primary care of respiratory patients.
3. Interpretation of pulmonary function tests and arterial blood gases.
4. To experience the use of mechanical ventilators, oxygen supplementation, and nebulization.
5. To observe and learn about bronchoscopy and other bedside procedures.
6. To read chest x-rays and CT scans
7. To refine performance of a chest physical exam.
8. Oral presentations at chest conference and at consult rounds.

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

STUDENT EXPERIENCES

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

INPATIENT:	80%
OUTPATIENT:	20%
CONSULTATION:	85%
PRIMARY CARE:	15%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
AM	9:00 - 12:00 p.m. ($2^{nd,}$ $4^{th\ \&\ 5th}$ Mon) or Consult Rounds Chest Clinic	9:00 - 12:00 p.m. Attending Rounds	9:00 - 12:00 p.m. Attending Rounds	9:00 - 12:00 p.m. Attending Rounds	9:00 - 12:00 p.m. Attending Rounds
PM	1:00 - 4:00 Pulmonary Attending Rounds	2:30 – 4:30 Medical Chest Conference	Procedures/ Bronchoscopies	Bronchoscopies/ Procedures	Pulmonary Function Tests

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: