Subinternship/Inpatient Location: UCLA 2013-2014 Revised: 10/4/13

COURSE CHAIR:

PHONE #:

COURSE OBJECTIVES (in order of importance)

Henry Honda, M.D.

E-MAIL:

SUPPORTING FACULTY:

Drs. Jan Tillisch, James Weiss, Mario Deng, Jamil AboulHosn, Arnold Baas, Holly Middlekauff, Eric Buch, Roderick Tung, Daniel Cruz, Ali Nsair, Gabriel Vorobiof, Thao Nguyen, Will Suh, Eric Yang, Marcia Calfon-Press, Kamran Shamsa, Martin Cadeiras, Eugene DePasquale, Reza Ardetali, Kristina Bostrom

STUDENT COORDINATOR: PHONE #: Sumiji Takahasi (310) 206-6286

E-MAIL: sutakahashi@mednet.ucla.edu

REPORT TO: Ronald Reagan UCLA Medical Center CCU (7th floor) at 7:15 a.m.

COLLEGE AFFILIATION: Academic Medicine

AVAILABLE FOR EXTERNS: Yes **STUDENTS / PERIOD:** max 2 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

- Knowledge of pathogenesis and natural history of cardiac disease; the orderly investigation, differential diagnosis, and management of coronary artery disease, valvular heart disease, and cardiomyopathies.
- Knowledge of the pharmacology of all major classes of cardiac medications.
- 3. Clinical skills: Medical interviewing and physical examination.
- Medical judgment, analysis of medical data, and synthesis of information.
- Interpretation of EKGs and skill in interpreting data from Swan-Ganz catheters.
- 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. **Please email coordinator for availability.**

STUDENT EXPERIENCES **COMMON PROBLEMS/DISEASES** INPATIENT: **CLOSE CONTACT WITH:** 100% Myocardial infarction **OUTPATIENT:** 0% **FULL-TIME FACULTY CLINICAL FACULTY** Angina CHF CONSULTATION: 0% **FELLOWS** 3. 4. Arrhythmias PRIMARY CARE: 100% RESIDENTS Valvular heart disease **INTERNS** Cardiac Transplantation OTHER: Cardiomyopathies

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	
АМ	7:30-9:30 Attending Rounds	7:30-9:30 Attending Rounds	7:30-9:30 Attending Rounds	7:30-9:30 Attending Rounds	7:30-9:30 Attending Rounds	
РМ	12:30 – 1:00 CCU didactic session 5:00 – 6:00 Cath. Conference 3102 RRUCLA	12:30 – 1:00 CCU didactic session	12:00 – 1:00 Cardiology Fellows Teaching Conference	12:30 – 1:00 CCU didactic session	12:30 – 1:00 CCU Didactic Session	

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: Email course coordinator for availability. Daily EKG or cardiac imaging review sessions will be arranged by the course chair.

ME420.01 CRITICAL CARE

Subinternship/Inpatient Location: OVH 2013-2014
Revised: 12/10/12

COURSE CHAIR: PHONE #:

Dennis Yick, M.D. (818) 364-3205

E-MAIL: dyick@dhs.lacounty.gov

SUPPORTING FACULTY:

Drs. Susan Stein, Dennis Yick, Nader Kamanger, and Nikhil

Barot

STUDENT COORDINATOR: PHONE #:

Mark DeVany (818) 364-3205

E-MAIL: mdevany@dhs.lacounty.gov

REPORT TO: Olive View Medical Center, Room 2B182 at 8:30

a.m

COLLEGE AFFILIATION: Acute Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Learn to interpret arterial blood gases, electrolytes, hemodynamic monitoring
- 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** INPATIENT: **CLOSE CONTACT WITH:** 100% GI Bleed **OUTPATIENT:** 0% **FULL-TIME FACULTY CLINICAL FACULTY** Chest pain Congestive heart failure CONSULTATION: 0% **FELLOWS** 4. Respiratory failure PRIMARY CARE: 100% Х RESIDENTS 5. Diabetic ketoacidosis **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
	8:00 - 9:00	8:00 - 9:00	8:00 - 9:00	8:00 - 9:00	8:00 - 9:00
	Work Rounds				
AM	9:00 - 12:00	9:00 - 12:00	9:00 - 12:00	9:00 - 12:00	9:00 - 12:00
	Attending Rounds				
	and X-Ray Rounds				
РМ	12:00 – 1:00	12:00 – 1:00	12:00 – 1:00	12:00 – 1:00	12:00 – 1:00
	Medicine Noon				
	Conference	Conference	Conference	Conference	Conference
	1:00	1:00	1:00	1:00	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

ME440.01 HEMATOLOGY-ONCOLOGY

Subinternship/Inpatient Location: CS 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Stephen Lim, M.D. (310) 423-1160

E-MAIL:

SUPPORTING FACULTY:

Dr. Michael Lil Dr. Angela Lopez Dr. Maria Delkiouking

STUDENT COORDINATOR: PHONE #:

Judy Jacobs (310) 423-4658

FAX: (310) 423-5200

E-MAIL: judith.jacobs@cshs.org

REPORT TO: Judy Jacobs, 9am, Room TBD, will be communi-

cated via email

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 1. Learn how to evaluate patients with malignancies.
- Management of oncologic and hematologic disorders.
- 3. Management of therapy related complications.
- 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.
- Management of neutropenic fevers.

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** INPATIENT: **CLOSE CONTACT WITH:** 90% Leukemia **OUTPATIENT:** 10% **FULL-TIME FACULTY** Lymphoma CLINICAL FACULTY Multiple myeloma CONSULTATION: 0% Х **FELLOWS** 3. Neutropenic fever PRIMARY CARE: 100% Х RESIDENTS Stem cell transplantation **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
АМ	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.

ME450.01 INTERNAL MEDICINE

Subinternship/Inpatient Location: CS 2013-2014
Revised: 12/10/12

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, 9:00 a.m., Room TBD—will be

communicated via email

COLLEGE AFFILIATION: Primary Care

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

DURATION: 3 weeks

8. AIDS

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 1. History and physical examination.
- Medical judgment: analysis of medical data and synthesis of information
- 3. Interpretation of tests (e.g., serum electrolytes).
- 4. Oral presentations.
- Knowledge of diagnosis and management of complex inpatient problems (e.g., respiratory insufficiency, renal insufficiency).
- Knowledge of drugs: diuretics, digoxin, antibiotics, steroids, brochodilators.
- 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** INPATIENT: **CLOSE CONTACT WITH:** 100% Renal diseases **OUTPATIENT:** 0% **FULL-TIME FACULTY** Cerebrovascular disease CLINICAL FACULTY Respiratory failure CONSULTATION: 0% **FELLOWS** 3. RESIDENTS 4. Diabetes mellitus PRIMARY CARE: 100% Pneumonia **INTERNS** 6. Peptic ulcer disease OTHER: 7. Chronic obstructive pulmonary disease

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
	8:00	8:30	8:30	8:00	8:30
	Morning Report	Morning Report	Morning Report	Morning Report	Grand Rounds
АМ	9:00	9:00	9:00	9:00	9:00
	Work Rounds				
	10:00	10:00	10:00	10:00	10:00
	Attending Rounds				
РМ	12:00	12:00	12:00	12:00	12:00
	Medicine Conference				
	1:00 – 6:00	1:00 – 6:00	1:00 – 6:00	1:00 – 6:00	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.

ME450.02 INTERNAL MEDICINE

Subinternship/Inpatient Location: HARBOR 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Darryl Y. Sue, M.D. (310) 222-2401

E-MAIL:

SUPPORTING FACULTY:

Department of Medicine Staff Harbor-UCLA Medical Center

STUDENT COORDINATOR: PHONE #:
Jan Kiernan (310) 222-2400

E-MAIL: jkiernan@ucla.edu

REPORT TO: Dept. of Medicine Office, 5-L-1, Harbor-UCLA Medical Center, Torrance, CA 90509-2910, 8:30 am.

COLLEGE AFFILIATION: Primary Care

AVAILABLE FOR EXTERNS: Yes (US Schools only)

STUDENTS / PERIOD: max 4 min 0

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

Upper gastrointestinal hemorrhage

8. Pneumonia, sepsis

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

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.
- Medical management of common problems.
- 5. Recognition and therapy of medical emergencies.
- 6. Indications and interpretations of commonly ordered tests.
- Proficiency with medical procedures such as nasogastric tube placement, venipuncture, lumbar puncture, thoracentesis, paracentesis, etc.
- 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** INPATIENT: **CLOSE CONTACT WITH:** 100% Congestive heart failure **OUTPATIENT:** 0% **FULL-TIME FACULTY FELLOWS** 2. Hypertension Diabetes mellitus CONSULTATION: 0% Χ **RESIDENTS** 3. 4. COPD-Chronic bronchitis & emphysema PRIMARY CARE: 100% Х INTERNS Cancer OTHER: Nursing care specialists 6. Coronary artery disease

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
АМ	7:00 – 9:00 Rounds 10:30 – 12:00 Attending Rounds	7:00 – 9:00 Rounds 8:30 – 9:30 Medical Grand Rounds	7:30 – 9:00 Rounds 10:30 – 12:00 Attending Rounds	7:00 – 9:00 Rounds 8:30-9:30 Morning Report	7:00 – 9:00 Rounds 10:30 – 12:00 Attending Rounds
РМ	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.

Subinternship/Inpatient Location: ST.MARY 2013-2014
Revised: 12/10/12

PHONE #:

COURSE CHAIR:

Chester Choi, M.D. (562) 491-9350

E-MAIL: chester.choi@dignityhealth.org

SUPPORTING FACULTY:

Chester Choi, MD; Sarah Strube, DO; Neill Ramos, MD

STUDENT COORDINATOR: PHONE #:

Jeffrey Power (562) 491-9350

E-MAIL: Jeffrey.Power@dignityhealth.org

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

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes
STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

8. Hepatic Disease

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

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
- Learn how to provide effective medical consultations to nonmedical 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** INPATIENT: **CLOSE CONTACT WITH:** 90% Coronary artery disease **OUTPATIENT:** 10% **FULL-TIME FACULTY** Congestive Heart Failure CLINICAL FACULTY CONSULTATION: 10% **FELLOWS** Pneumonia Х 3. 4 Chronic Obstructive Pulmonary Disease PRIMARY CARE: 90% Х RESIDENTS Atrial Fibrillation **INTERNS** 6. Diabetes Mellitus OTHER: Cerebrovascular Disease

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	ır Monday Tuesday		Wednesday	Thursday	Friday
АМ	9:00 - Work Rounds w/ Residents 10:00 - Teaching Attending Rounds	9:00 - Work Rounds w/ Residents 10:00 - Teaching Attending Rounds	9:00 - Work Rounds w/ Residents 10:00 - Teaching Attending Rounds	9:00 - Work Rounds w/ Residents 10:00 - Teaching Attending Rounds	9:00 - Work Rounds w/Residents 10:00 - Teaching Attending Rounds
РМ	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 3:00 - Afternoon Report 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 3:00 - Afternoon Report 4:00 - Sign-out rounds Patient Care	12:00 - Noon Conf. Didactic Teaching 1:30 - New Admissions & Patient Care 3:00 - Afternoon Report 4:00 - Sign-out rounds Patient Care	12:00 - Cardiology Case Conference 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 3:00 - Afternoon Report 4:00 - Sign-out rounds Patient Care

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call with house staff every 4th day. No overnight calls required.

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, Long Beach, CA 90313.

ME450.04 INPATIENT MEDICINE

Subinternship/Inpatient Location: WVA 2013-2014
Revised: 12/10/12

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

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COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 5 min 1

DURATION: 3 weeks

Altered mental status

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Improved history and physical techniques, stressing the ability to focus and prioritize.
- 3. Diagnosis and management of complex in-patient problems.
- Development of oral presentation skills in a conference setting.
- 5. Improving doctor-patient relationships.
- 6. 6Team approach and utilization of allied health personnel.
- 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.
- Socioeconomic aspects of medical care, e.g., costcontainment 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** INPATIENT: CLOSE CONTACT WITH: 100% ASHD, angina, CHF, HTN **OUTPATIENT:** 0% **FULL-TIME FACULTY** Decompensated liver disease CLINICAL FACULTY Gastrointestinal bleeding CONSULTATION: 0% **FELLOWS** Х Infection, pneumonia, sepsis PRIMARY CARE: 100% Χ RESIDENTS DKA, AKA, mixed metabolic disease **INTERNS** 6. Obstructive lung disease OTHER: Students, Health staff 7. Neoplasia

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
АМ	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
РМ	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

Subinternship/Inpatient Location: Kaiser Sunset 2013-2014
Revised: 12/10/12

PHONE #:

COURSE CHAIR:

Peter Chee, M.D. (323) 783-4892

E-MAIL: peter.c.chee@kp.org

SUPPORTING FACULTY:

The staff of the Department of Internal Medicine

STUDENT COORDINATOR: PHONE #:

Ashley Versher (323) 783–7836

E-MAIL: Ashley.e.versher@kp.org

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

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

8. AIDS

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 1. Broaden medical knowledge base.
- 2. Refine history, physical exam, and case presentation skills.
- 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.
- 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** INPATIENT: **CLOSE CONTACT WITH:** 100% Coronary artery disease/CHF **OUTPATIENT:** 0% **FULL-TIME FACULTY** COPD and asthma **CLINICAL FACULTY** Pneumonia CONSULTATION: 0% Χ **FELLOWS** 3. 4. Sepsis PRIMARY CARE: 100% RESIDENTS GI bleeding INTERNS Cerebrovascular disease OTHER: 7. Renal failure

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	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
РМ	12:30 - Noon Conference ence 1:30 - Patient Care	12:30 - Noon Conference 1:30 - Patient Care	12:30 - Noon Conference ence 1:30 - Patient Care	12:30 - Noon Conference ence 1:30 - Patient Care	12:30 - Noon Conference ence 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 2013-2014
Revised: 12/10/12

PHONE #:

COURSE CHAIR:

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 8:30 am.

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Experience in primary patient responsibility, acting as a subintern.
- 4. Ability to read and interpret chest x-rays; read EKGs.
- 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 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** INPATIENT: **CLOSE CONTACT WITH:** 100% Pneumonia **OUTPATIENT:** 0% **FULL-TIME FACULTY** CLINICAL FACULTY Tuberculosis GI bleeding CONSULTATION: 0% **FELLOWS** 3. Asthma PRIMARY CARE: 100% Х RESIDENTS Congestive heart failure **INTERNS** 6. Cancer OTHER: Allied health personnel Diabetes 7. 8. HIV-related illnesses

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

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	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 9:00 – 10:00: Morning Report 10:00-12:00: 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 10:00-12:00: 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
РМ	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 2013-2014
Revised: 12/10/12

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 #:

Andrew Yuen (310) 267-9657

E-MAIL: aryuen@mednet.ucla.edu

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

COLLEGE AFFILIATION: Primary Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 6 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Improved clinical skills, including medical judgment and analysis of medical data and synthesis of information.
- Diagnosis and therapeutic management of acutely ill patients and/or complex medical problems (e.g., sepsis, electrolyte problems, and FUO).
- Improving the doctor-patient relationship and medical-ethical issues of practice.
- Interpretation of laboratory tests (e.g., electrolytes, liver function tests, blood gases, EKGs, pulmonary function tests).
- Basic science foundation of pathophysiologic mechanisms of disease
- 8. Integral role of participation in whole health care team.
- 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	INPATIENT:	100%	CLOSE CONTACT WITH:					
1. Cancer	OUTPATIENT:	00%	X FULL-TIME FACULTY					
2. Heart Disease			X CLINICAL FACULTY					
3. Pulmonary Disease	CONSULTATION:	0%	X FELLOWS					
4. Infections	PRIMARY CARE:	100%	X RESIDENTS					
5. G.I. Bleeding			X INTERNS					
6. Liver Disease			X OTHER: Nursing & Hospital Ancillary					
7. Hypertension & Diabetes			Staff					
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

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	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
РМ	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 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Rajan Saggar, M.D. (310) 825-5615

FAX: E-MAIL:

SUPPORTING FACULTY:

Pulmonary & Critical Care Faculty

STUDENT COORDINATOR: PHONE #:

Heather Draper (310) 825-5615

FAX: (310) 206-8622

E-MAIL: hdraper@mednet.ucla.edu

REPORT TO: Pulmonary/Critical Care Attending, MICU-

4West, UCLA Med. Ctr. 7:45 a.m.

COLLEGE AFFILIATION: Acute Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Interpretation of blood gases, EKGs, chest radiographs, hemodynamic parameters, etc.
- Knowledge of the clinical pharmacology of bronchodilators, cardiovascular drugs, oxygen, antibiotics, etc.
- Knowledge of the use of mechanical ventilators and other aspects of respiratory therapy.
- 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.
- Improved history, physical exam, and medical record keeping.
- 8. Interaction with a multidisciplinary critical care team.
- 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** INPATIENT: CLOSE CONTACT WITH: 100% Respiratory failure (COPD, ARDS) **OUTPATIENT:** 0% **FULL-TIME FACULTY** Shock (cardiogenic, hemorrhagic, septic) CLINICAL FACULTY Drug overdose CONSULTATION: 0% Х **FELLOWS** 3. 4. Renal failure PRIMARY CARE: 100% Χ RESIDENTS Immuno-compromised patients **INTERNS** Multiorgan system dysfunction OTHER: Nurses, Respiratory Thera-Mechanical ventilation pists, Radiologists 8. Hepatic failure

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	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
РМ	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 2013-2014
Revised: 12/10/12

COURSE CHAIR: PHONE #:

Claude Killu, M.D. (310) 423-8939

E-MAIL: claude.killu@csh.org

SUPPORTING FACULTY:

Drs. Mark Ault, Philip Ng, Dani Hackner, and Lawrence Maldonado

STUDENT COORDINATOR: PHONE #:

Judy Jacobs (310) 423-4658

FAX: (310) 423-5200

E-MAIL: judith.jacobs@cshs.org

REPORT TO: Judy Jacobs, 9:00 a.m., Room TBD-Will be

communicated via email

COLLEGE AFFILIATION: Applied Anatomy

AVAILABLE FOR EXTERNS: Yes
STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

8. Acid-based and electrolyte inbalance

8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47 (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.

COURSE OBJECTIVES (in order of importance)

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

STUDENT EXPERIENCES							
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:				
 Acute myocardial infarction & failure 	OUTPATIENT:	0%	X FULL-TIME FACULTY				
Septic shock			X CLINICAL FACULTY				
GI hemorrhage	CONSULTATION:	0%	X FELLOWS				
Complicated respiratory failure	PRIMARY CARE:	100%	X RESIDENTS				
CNS catastrophes			X INTERNS				
6. Drug intoxications			X OTHER: Pharmacists				
7. Acute renal failure							

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
АМ	7:30 Work Rounds				
	9:00: MICU Work Rds	9:00: MICU Work Rds	9:00: MICU Work Rds	8:00 A P.G.	9:00: MICU Work Rds
РМ	12:00: Dept. of Med				
	Conf.	Conf.	Conf.	Conf.	Conf.
	4:30: MICU Sign-out				
	Rounds	Rounds	Rounds	Rounds	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 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #: (310) 423-1835

Michael Lewis, M.D. Isabel Pedraza, M.D.

(310) 423-1836

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, 9am, Room TBD, will be communi-

cated via email

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

8. Bronchogenic carcinoma

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Demonstration and utility of relevant clinical diagnostic skills in pulmonary critical care.
- Application of respiratory-physiology to the diagnosis and management of respiratory failure. Extensive respiratory care unit experience. Special emphasis on heart-lung interaction
- Knowledge of the pharmacology of respiratory drugs, including adrenergic bronchodilators, cardiovascular drugs and oxygen.
- 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.
- 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 12-bed RICU is managed by 3 housestaff teams (1 resident & 1 intern per team) on an every fourth night rotation.

STUDENT EXPERIENCES						
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:			
 Chronic obstructive pulmonary disease 	OUTPATIENT:	0%	X FULL-TIME FACULTY			
2. Asthma			X CLINICAL FACULTY			
Acute respiratory failure	CONSULTATION:	0%	X FELLOWS			
4. ARDS	PRIMARY CARE:	100%	X RESIDENTS			
5. Pneumonia			X INTERNS			
Pulmonary embolism			X OTHER: Allied Health Personnel			
Neuromuscular ventilatory failure						

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
АМ	9:30 – 12:00 RICU Teaching Rounds	9:30 –12:00 RICU Teaching Rounds RICU Core Curriculum	8:00 – 9:00 Pulmonary Grand Rounds 9:30 – 12:00 RICU Teaching Rounds	9:30 –12:00 RICU Teaching Rounds RICU Core Curriculum	8:30 – 9:30 Medical Grand Rounds 9::30 – 12:00 RICU Teaching Rounds
РМ	3:00 – 3:30 Sign-out Rounds	3:00 – 3:30 Sign-out Rounds	3:00 – 3:30 Sign-out Rounds 5:00—6:00 Critical Care Conference	3:30 Sign-out Rounds	3:00 - 3:30 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 2013-2014
Revised: 1/12/12

COURSE CHAIR:

PHONE #:

Boian Cercek, M.D. (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, 9am, Room TBD, will be communi-

cated via email

COLLEGE AFFILIATION: Acute Care
AVAILABLE FOR EXTERNS: Yes
STUDENTS / PERIOD: max 2 min

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Clinical skills: medical interviewing and physical examination.
- Medical decision making: analysis of medical data and synthesis of information.
- 4. Special skills, including emphasis on EKG reading.
- Diagnosis and management of complex inpatient problems.
- 6. Specialized CCU patient case.
- 7. Oral presentation of clinical cases.
- Review of cardiac imaging studies, echocardiography, angiography, magnetic resonance.

DESCRIPTION: In Cardiac Intensive Care Unit (CICU) there are 12 beds, high acuity cardiac patients. They are covered by 3 residents teams, 2 cover days, 1 covers nights. Day team work hours are alternating for 1 team from 7AM until 8PM, the other from 7AM until 3:30PM. Day teams consist of 1 resident, 1 intern and 1 student. Night team works from 8PM until 10AM. It consists of 1 resident and 1 intern, no student. Each team admits anywhere from 2 - 4 patients per day. Cardiology fellow is present from 7AM until 5PM, and on call in house or within 15 minutes from 5PM to 7AM. One student is responsible for at least one, but no more than two patients at any time. The student assumes responsibility for work-up of patients, communication with other healthcare providers, with patients and their families, preparation and implementation of the plan of treatment, and are encouraged to participate in the procedures (under proper supervision). During rounds, students are expected to present their patients, and examine them with the attending, and discuss the plan of action. Morning bedside rounds with attending and fellows are from 8AM to 11:30AM. The night team presents first in order to leave by 10AM. The day team that stay until 8PM takes sign-out from the day team that leaves at 3PM and has sign-out rounds to the night team at 8PM. At sign-out rounds the patients are presented in a more concise format to update the sign-out sheets for proper continuation of care. Every morning after rounds, there are cardiology conference, medical teaching conference, or EKG Lecture organized specifically for the rotating students.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:
Acute myocardial infarction	OUTPATIENT:	0%	X FULL-TIME FACULTY
Congestive heart failure			X CLINICAL FACULTY
Acute pulmonary edema	CONSULTATION:	0%	X FELLOWS
Hypotension and shock	PRIMARY CARE:	100%	X RESIDENTS
Cardiac arrhythmias			X INTERNS
Valvular heart disease			OTHER:
4. Hypotension and shock5. Cardiac arrhythmias			X RESIDENTS X INTERNS

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

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:30: Clinical pre-rounds with postcall team, fellow/ resident/intern 8:00-11:30: Rds w/ at- tending, bedside rds. Review of studies.	7:30: Clinical pre-rounds with postcall team, fellow/ resident/intern 8:00-11:30: Rds w/ attend- ing, bedside rds. Review of studies.	7:30: Clinical pre-rounds with postcall team, fellow/ resident/intern 8:00-11:30: Rds w/ at- tending, 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.
РМ	12:00-1:30: Lecture 2:00-3:00: Follow-up of patients 3:00-4:00: Sign-out rds with fellow/attending	12:00-1:30: Lecture 2:00-3:00: Follow-up of patients 3:00-4:00: Sign-out rds with fellow/attending	12:00-1:30: Lecture 2:00-3:00: Follow-up of patients 3:00-4:00: Sign-out rds with fellow/attending	12:00-1:30: Lecture 2:00-3:00: Follow-up of patients 3:00-4:00: Sign-out rds with fellow/attending	12:00-1:30: Lecture 2:00-3:00: Follow-up of patients 3:00-4:00: Sign-out rds with fellow/attending

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No night call, 1 day off per week.

ME455.05 MEDICAL/PULMONARY INTENSIVE CARE

Subinternship/Inpatient Location: WVA 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Guy Soohoo, M.D. (310) 268-3021

E-MAIL: guy.soohoo@va.gov

SUPPORTING FACULTY:

Drs. Raj Batra, Michelle Zeidler, Gina Lee, Scott Oh, Howard

Saft

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.

COLLEGE AFFILIATION: Primary Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- Rapid evaluation and assessment of the critically ill patient and prompt initiation of appropriate diagnostic and therapeutic maneuvers.
- 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
- Indications, applications, and utilization of invasive monitoring, including pulmonary-artery catherization.
- Arterial blood gas analysis and interpretation of mixed metabolic disturbances.
- Understanding the rational use of pressors, inotropes, antibiotics, anti-arrthymics, oxygen, steroids, etc., in the critically ill patient.
- Appreciation of the team approach to the critically ill patient
- Appreciation of the ethical considerations involved in lifethreatening 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 EXPERI	ENCES	
COMMON PROBLEMS/DISEASES 1. Infection and septic shock	INPATIENT: OUTPATIENT:	100% 0%	CLOSE CONTACT WITH: X FULL-TIME FACULTY
 Respiratory failure Decompensated liver disease Gastrointestinal bleeding 	CONSULTATION: PRIMARY CARE:	0% 100%	X CLINICAL FACULTY X FELLOWS X RESIDENTS
 Multiple metabolic disturbances Malignant hypertension Congestive heart failure 			X INTERNS X OTHER: Critical care nurses

8. Ischemic heart disease9. Diabetic ketoacidosis10. Drug intoxication

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:

TYPICAL WEEKLY SCHEDULE

50

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	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
РМ	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 INPATIENT CARDIOLOGY SERVICE

2013-2014 Subinternship/Inpatient Location: WVA Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Jesse Currier, M.D.

(310) 268-4695

E-MAIL:

SUPPORTING FACULTY:

Drs. Bersohn, Buljubasic, Chang, Currier, Ebrahimi, Feliciano, Han, Mody, Shapiro, and Warner.

STUDENT COORDINATOR:

PHONE #:

Shayne West (310) 268-3839

E-MAIL: Shayne.west@va.gov

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

Room 4425.

COLLEGE AFFILIATION: Primary Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- To provide an opportunity for the student to learn how to perform a proper history and physical examination on patients with cardiac disease.
- To teach the student how to interpret an electrocardio-2.
- To provide the student with the fundamentals of diagnosing and managing cardiac arrhythias.
- 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 lifethreatening cardiac conditions.
- 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 dis-
- 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.
- 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

- Coronary artery disease
- Acute coronary syndromes/acute MI
- Pulmonary edema/congestive heart failure
- 4. Cardiac arrhythmias
 - Valvular heart disease
 - Acute pericarditis/pericardial tamponade

INPATIENT: CLOSE CONTACT WITH: 100%

OUTPATIENT: 0% **FULL-TIME FACULTY** CLINICAL FACULTY

CONSULTATION: 0% Х **FELLOWS** PRIMARY CARE: 100%

RESIDENTS Χ

INTERNS

OTHER: Nurses/technicians

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:45 Work Rounds 8:30 CCU Rounds	7:45 Work Rounds 8:30 CCU Rounds	7:45 Work Rounds 8:30 CCU Rounds	7:45 Work Rounds 8:30 CCU Rounds	7:45 Work Rounds 8:30 CCU Rounds
РМ	12:00 Journal Club Patient Management 4:30 Med-Surg Conference	Patient Management	12:00 Medical Grand Rounds Patient Management	Patient Management	1:00 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)

E-MAIL: ashley.e.versher@kp.org

Subinternship/Inpatient Location: KAISER.SUN 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

PHONE #:

Dr. Mihran Garabedian

(323) 783-4858

E-MAIL:

SUPPORTING FACULTY:

Critical Care/Pulmonary Medicine Faculty

STUDENT COORDINATOR:
Ashley Versher

(323) 783-7836

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

COLLEGE AFFILIATION: Urban Underserved

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

8. Cardiovascular problems

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- Gain an understanding of the pathogenesis and pathophysiology of common medical problems in the intensive care setting
- Understand work-up and treatment of problems such as Respiratory Failure, ARDS, Shock, Sepsis, GI Bleed, Coma, Drug Overdose, Electrolyte Disorders, etc.
- Manage patients on ventilators and on hemodynamic monitors
- 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
- 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	INPATIENT:	100%	CLOSE CONTACT WITH:				
Respiratory failure	OUTPATIENT:	0%	X FULL-TIME FACULTY				
Cerebrovascular accidents			X CLINICAL FACULTY				
GI hemorrhage	CONSULTATION:	0%	FELLOWS				
Drug overdoses	PRIMARY CARE:	100%	X RESIDENTS				
5. Sepsis			X INTERNS				
6. Multi-organ failure			OTHER:				
7. Mechanical ventilation							

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
АМ	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,	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds	8:00 - 10:00 Work Rounds 10:00 - 12:00 Attending Rounds
РМ	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	Thoracic Surgery) 1:30-3:00 Work Rds 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rds/ 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.

2013-2014 Subinternship/Inpatient Location: WVA Revised: 12/10/12

PHONE #:

COURSE CHAIR: PHONE #:

Shawkat Dhanani, M.D. (310) 268-3036

E-MAIL: Shawkat.dhanani@med.va.gov

SUPPORTING FACULTY:

Donna Henriques

M. Cantrell, T. Hahn, D. Norman, C. Lee, C. Sarzkisian, D. Ganz, J. Chodash, C. Castle, T. Yoshikawa, S. Murray, C. Alessi, N. Weintraub

STUDENT COORDINATOR:

(310) 268-3474

E-MAIL: Donna.Henriques@va.gov

REPORT TO: Bldg. 500, Room 2400 @ 8:00 am on first day.

COLLEGE AFFILIATION: Urban Underserved College

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.)
- 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, expec-
- 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 Multi-campus 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 multi-campus educational activities: Weekly Thursday Clinical Conference, Research Seminar, and Journal

STUDENT EXPERIENCES

CONSULTATION:

PRIMARY CARE:

COMMON PROBLEMS/DISEASES INPATIENT: 80% 20%

- Arterioslerotic heart disease **OUTPATIENT:**
- Dementia/ Delirium Incontinence 3.
- 4 Stroke/rehabilitation
- Infections
- 6. Sensory impairment
- Falls 7.
- Failure to thrive

CLOSE CONTACT WITH:

Available

100%

- **FULL-TIME FACULTY**
 - CLINICAL FACULTY
 - Х **FELLOWS**
 - Χ RESIDENTS
 - **INTERNS**
 - OTHER: Nurses, pharmacy, social work, audiology, optometry, & psychology

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
АМ	7:00: Work Rounds 8:15: Morning Report 9:00: Attending Team Rounds 11:00: Didactics	7:00: Work Rounds 8:15: Morning Report 9:00: Attending Team Rounds 11:00: Didactics	7:00: Work Rounds 8:15: Morning Report 9:00: Attending Team Rounds 11:00: Didactics	7:00: Work Rounds 8:15: Morning Report 9:00: Attending Team Rounds 11:00: Didactics	7:00: Work Rounds 8:15: Morning Report 9:00: Attending Team Rounds
РМ	12:00: Noon Conference 1:00-5:00 Consult Rounds 2:00: Team Meeting	12:00: Noon Conference 1:00-5:00 Consult Rounds	12:00: Grand Rounds 1:00-5:00 Consult Rounds	12:00: Noon Conference 1:00-5:00 Consult Rounds 3:00: MPGMG Lecture	12:00: Noon Conference ence 1:00-5:00 Consult Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No night calls. See assigned patients one weekend.

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 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Darryl Y. Sue, M.D.

(310) 222-2401

E-MAIL:

SUPPORTING FACULTY:

Drs. Gregory Mason, Kathy Sietsema, William Stringer, David Hsia, Dong Chang and Janine Vintch

STUDENT COORDINATOR: PHONE #:

Jan Kiernan (310) 222-2400

E-MAIL: jkiernan@ucla.edu

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

COLLEGE AFFILIATION: Acute Care

AVAILABLE FOR EXTERNS: Yes (US Schools only)

STUDENTS / PERIOD: max 2 min 0

DURATION: 3 weeks

8. Coma

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

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

DESCRIPTION: The student <u>shares</u> responsibility with an intern for 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** INPATIENT: **CLOSE CONTACT WITH:** 100% Acute respiratory failure **OUTPATIENT:** 0% **FULL-TIME FACULTY** GI bleeding **CLINICAL FACULTY** CONSULTATION: 0% **FELLOWS** 3. Shock 4. Sepsis PRIMARY CARE: 100% Х RESIDENTS Hepatic failure **INTERNS** 6. Acute renal failure OTHER: Respiratory Therapists Electrolyte imbalance 7.

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
АМ	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
РМ	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: 16 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 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Silverio Santiago, M.D.

(310) 268-3021

E-MAIL:

SUPPORTING FACULTY:

Drs. Raj Batra, Steven Dubinett, Guy Soo Hoo, Michelle Zeidler, Howard Saft, Gina Lee

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.

COLLEGE AFFILIATION: Academic Medicine

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

8. Tuberculosis

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- 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.
- Interpretation of chest roentgenograms, pulmonary function tests, arterial blood gases, pleural fluid data, etc.
- Understanding the indications for bronchoscopy, aspiration lung biopsy, thoracentesis, and pleural biopsy.
- Knowledge of the pharmacology of bronchodilators and corticosteroids
- 5. Understanding the use of mechanical ventilators.
- 6. Clinical skills: medical interviewing and physical examination.
- Medical decision making: analysis of medical data and synthesis of information.

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** INPATIENT: **CLOSE CONTACT WITH:** 90% Acute respiratory failure **OUTPATIENT:** 10% **FULL-TIME FACULTY** Lung carcinoma/pulmonary nodule CLINICAL FACULTY CONSULTATION: 100% **FELLOWS** Pneumonias 3. 4. Obstructive airways disease PRIMARY CARE: 0% RESIDENTS Interstitial lung disease **INTERNS** 6. Pleural effusion OTHER: Pre- and post-operative evaluations 7.

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
АМ	Consults	Consults	8:00 Pulmonary Conf. Consults/Rounds	Consults/Rounds	Consults
РМ	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

Subinternship/Inpatient Location: OVH 2013-2014
Revised: 12/10/12

COURSE CHAIR:

PHONE #:

Nader Kamangar, M.D. (818) 364-4509

E-MAIL: kamangar@ucla.edu

SUPPORTING FACULTY:

Mark DeVany

Drs. Dennis Yick, Nader Kamangar, Greg Bierer, and Nikhil Barot

STUDENT COORDINATOR:

PHONE #: (818) 364-3205

E-MAIL: mdevany@dhs.lacounty.gov

REPORT TO: Mark DeVany, OVMC, Rm. 2B-182 at 8:30 am

COLLEGE AFFILIATION: Acute Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

COURSE OBJECTIVES (in order of importance)

- To understand the physiologic and genetic basis of respiratory disease and respiratory failure.
- To obtain experience in the evaluation and primary care of respiratory patients.
- Interpretation of pulmonary function tests and arterial blood gases
- 4. To experience the use of mechanical ventilators, oxygen supplementation, and nebulization.
- 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.

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 EXPERIE	ENCES				
COMMON PROBLEMS/DISEASES	INPATIENT:	80%	CLOSE CONTACT WITH:			
Lung cancer	OUTPATIENT:	20%	X FULL-TIME FACULTY			
2. Asthma			X CLINICAL FACULTY			
3. COPD	CONSULTATION:	85%	X FELLOWS			
4. Pneumonia	PRIMARY CARE:	15%	X RESIDENTS			
Tuberculosis			X INTERNS			
Interstitial disease			X OTHER: Respiratory Therapists			
7. ARDS						

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
АМ	8:00 - 12:00 p.m. 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
РМ	1:00 - 4:00 Pulmonary Attending Rounds	2:30 – 4:30 Medical Chest Conference	Procedures/ Bronchoscopies	Bronchoscopies/ Procedures	1:00 - 5:00 Chest Clinic

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ME470.04 PULMONARY DISEASE AT BARLOW RESPIRATORY HOSPITAL

Subinternship/Inpatient Location: ASSOC 2013-2014
Revised: 12/20/12

COURSE CHAIR: PHONE #:

David Nelson, M.D. (213) 202-6857

E-MAIL: dnelson@barlow2000.org

SUPPORTING FACULTY:

Dr. Christopher Ho

STUDENT COORDINATOR: PHONE #:

Christi Romero (213) 250-4200 x 3409

E-MAIL: cromero@barlow2000.org

REPORT TO: 2000 Stadium Way, LA, 1st floor switchboard at

9:00 a.m. Ask for Dianne Wheatley.

COLLEGE AFFILIATION: Acute Care College

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

By Arrangement

8. Renal insufficiency

COURSE OBJECTIVES (in order of importance)

- 1. Enhance basic knowledge of pulmonary medicine.
- Improve clinical skills in evaluation of patients with respiratory problems by working up and presenting patients with severe lung disease.
- 3. Improve clinical skills by identifying and solving problems in the management of ventilator dependent patients.
- 4. Interpret pulmonary medicine procedure, services, and tests in the management of ventilator dependent patients.
- Learn appropriate format for medical record keeping and for writing consultations.
- 6. Participate as a member of the health care team.
- Participate in the management of patients enrolled in ongoing pulmonary research studies.
- Understand research protocols and assist attending physician in data collection procedures, such as work of breathing and oxygen cost of breathing.

DESCRIPTION: Students will round with pulmonologists on critically ill patients. The attending physician will supervise the students, countersigning work-ups & orders. Students will attend noon teaching conferences at which 1) new patients are presented and discussed;) chest x-rays and other diagnostic tests are reviewed; 3) problem cases, complications, and deaths are reviewed; 4) didactic teaching is performed using printed educational material; and 5) administrative matters are accomplished.

STUDENT EXPERIENCES **COMMON PROBLEMS/DISEASES** INPATIENT: **CLOSE CONTACT WITH:** 100% Respiratory failure **OUTPATIENT:** 0% **FULL-TIME FACULTY** COPD **CLINICAL FACULTY** ARDS CONSULTATION: 0% **FELLOWS** 3. 4 Pneumonia, bacterial PRIMARY CARE: 100% RESIDENTS Congestive heart failure **INTERNS** 6. Electrolyte imbalance OTHER Diabetes mellitus 7.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 2 - 3

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	9:00 Attending Rounds 10:30 Pt. Assess/Problem Solving	9:00 Attending Rounds 10:30 Pt. Assess/ Problem Solving	9:00 Attending Rounds 10:30 Pt. Assess/ Problem Solving	9:00 Attending Rounds 10:30 Pt. Assess/ Problem Solving	9:00 Attending Rounds 10:30 Pt. Assess/ Problem Solving
РМ	12:00 – 4:00 Pt. Care Activities	1:00 Team Conference 2:00 – 4:00 Pt. Care Activities	12:00 – 2:00 Clinical Conference 2:00 – 4:00 Pt. Care Activities	1:00 Team Conference 2:00 – 4:00 Pt. Care Activities	12:00 – 4:00 Pt. Care Activities

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

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