PE305.01 PEDIATRIC ALLERGY/IMMUNOLOGY

Subinternship	Loca	tion: UCLA	2013-2014 Revised: 12/10/12
COURSE CHAIR: Maria Garcia-Lloret, MD E-MAIL: migarci	PHONE #: (310) 825-6481 a@mednet.ucla.edu	(310) 825-6481 1. Knowledge of common problem and other immunologic disord	
SUPPORTING FACULTY: E. Richard Stiehm, MD, Robert L. Rot		a) Recurrent infect b) Asthma c) Eczema	ion
STUDENT COORDINATOR: Madeline Verzola	PHONE #: (310) 267-9128	d) Urticaria e) Fever of unknow	vn origin
E-MAIL: mverzola@mednet.ucla.edu		f) Chronic cough g) Food allergy	
REPORT TO: Dr. Maria Garcia-Lloret a 430 MDCC	t 8:00 am in room 12-	 Basic knowledge of immu deficiency or allergic or a 	ne mechanisms leading to immuno- utoimmune disease.
COLLEGE AFFILIATION: Primary Care	9	 Ability to perform pulmonative testing. 	ary function tests and allergy skin
AVAILABLE FOR EXTERNS: Yes		of primary immune deficie	
STUDENTS / PERIOD: max 1 min	1	 Knowledge of drugs used tients. 	I to treat asthmatic and allergic pa-
DURATION: 3 weeks		 Ability to diagnose and m severe combined immuno 	anage complex inpatient cases; odeficiency
2013-2014 ROTATIONS BEGIN WEEK 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38,			

DESCRIPTION: We anticipate this will be primarily an outpatient rotation, although the students are welcome to participate in inpatient care as desired. It is recommended that students check with the Allergy/Immunology/Rheumatology Office in advance so arrangements for private practice visits may be arranged. Students may be asked to do a clinical presentation.

	STUDENT EXPERIE	ENCES	
COMMON PROBLEMS/DISEASES	INPATIENT:	20%	CLOSE CONTACT WITH:
1. Asthma	OUTPATIENT:	80%	X FULL-TIME FACULTY
Allergic rhinitis			X CLINICAL FACULTY
3. Eczema	CONSULTATION:	80%	X FELLOWS
 Hypogammaglobulinemia 	PRIMARY CARE:	20%	RESIDENTS
5. Urticaria			INTERNS
6. Other immunodeficiency disorders			OTHER:
7. Food allergy			

8. The child with recurrent infections

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Monday Tuesday Wednesday		Thursday	Friday
АМ	Dr. Garcia Clinic Inpatient Rounds	Dr. Garcia Mobile Asthma Clinic	Inpatient Rounds	Dr. Roberts Clinic	8:00 Grand Rounds 9:00 Food Allergy Clinic
РМ	Dr. Stiehm Immunology Clinic Dr. Garcia Clinic	Inpatient Rounds	Dr. Roberts Clinic	1:15 Clinical Conference 2:15 Basic Immunology Course	12:30 - 1:30 Allergy Conference Dr. Roberts Clinic

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

PE320.01 PEDIATRIC EMERGENCY MEDICINE

Subinternship		Location: HA	on: HARBOR 2013-2014 Revised: 12/10/12		
COURSE CHAIR: Dr. Stanley Inkelis E-	PHONE # (310) 222-3500 or (310) 222-6745 MAIL: inkelis@emedharbor.edu	: CO 1.	DURSE OBJECTIVES (in order of importance) Recognize common acute ambulatory pediatric problems, such as upper respiratory infections, otitis media, gastroenteri- tis, rashes, asthma, trauma, etc.		
SUPPORTING FACULT Drs. Carol Berkowitz, M Burbulys, Marianne G	Monica Sifuentes, Kelly Young, David	2. 3.	Demonstrate improved history-taking and physical examina- tion skills. Perform oral presentation of clinical cases.		
STUDENT COORDINAT		4. : 5.	Demonstrate medical judgment, analysis of medical data, and synthesis of information. Perform techniques or procedures (e.g., lumbar punctures, arterial blood gas).		
	MAIL: apena@labiomed.org	6.	Interpret tests and special skills such as CBC, blood smears, urinalysis, sed rate, electrolytes, blood gases, reading of x-rays.		
	kelis, M.D., Pediatric Emergency De- arbor-UCLA Medical Center.	7.	Recognize drugs frequently used in pediatrics, such as anti- microbials, anticonvulsants, antipyretics, and bronchodilators.		
COLLEGE AFFILIATION	I: Acute Care	8.	Demonstrate medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).		
AVAILABLE FOR EXTEN	RNS: Yes	9. 10.	Become familiar with an adolescent clinic, paramedic unit and child abuse unit. Improve the doctor-patient relationship.		
STUDENTS / PERIOD: n DURATION: 3 we	nax 1 min 1 eks	10.			

2013-2014 ROTATIONS BEGIN WEEKS: 8, 11, 14, 17, 20, 27, 30, 33, 38, 41, 44, 47

DESCRIPTION: The elective in Pediatric Emergency Medicine is designed to familiarize the student with care of the acutely ill pediatric patient. In addition, the student will be exposed to a paramedic unit and a child abuse crisis clinic.

		STUDENT EXPERI	ENCES	
CC	MMON PROBLEMS/DISEASES	INPATIENT:	0%	CLOSE CONTACT WITH:
1.	URI/Otitis media	OUTPATIENT:	100%	X FULL-TIME FACULTY
2.	Skin diseases			X CLINICAL FACULTY
3.	Gastroenteritis	CONSULTATION:	0%	X FELLOWS
4.	Asthma	PRIMARY CARE:	100%	X RESIDENTS
5.	Abdominal pain			X INTERNS
6.	Pneumonia			X OTHER: Nurses, Paramedics
7.	Trauma lacerations, fractures			

8. Urinary tract infections

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 30

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 450

TYPICAL WEEKLY SCHEDULE

Hour	lour Monday Tuesday Wednesday		Wednesday	Thursday	Friday
АМ	8:00 – 8:30 Chart Rounds 8:30 – 12:00 Peds ED	8:00 – 8:30 Chart Rounds 8:30 – 9:30 Peds ED Conference 9:30 – 12:00 Peds ED	8:00 – 8:30 Chart Rounds 8:30 – 12:00 Peds ED	8:00 – 8:30 Chart Rounds 8:30 – 9:30 Grand Rounds 9:30 – 12:00 Peds ED	8:00 – 8:30 Chart Rounds 8:30 – 9:30 Case Conference 9:30 – 12:00 Peds ED
РМ	1:00 – 5:00 Peds ED	1:00 – 5:00 Peds ED	1:00 – 5:00 Peds ED	1:00 – 5:00 Paramedic Ride Along	1:00 – 5:00 Crisis Center (Child Abuse)

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: 2-3 night shifts/week (4 p.m.-12 p.m.) in place of daytime shifts and one weekend shift.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: One day is spent riding with a paramedic unit. One half day is spent at Harbor's child abuse clinic. When available, one half day every week is spent in an adolescent clinic. Attendance at resident conference is encouraged.

PE320.02 PEDIATRIC EMERGENCY MEDICINE

Subinternship	internship Location: OVH			
COURSE CHAIR: Matt Waxman, M.D. Alan Quillian, M.D. E-MAIL:	PHONE #: (818) 364-3108 (818) 364-3233	of pediatric emergency co 2. Gain experience in minor	aluation, diagnosis, and management	
SUPPORTING FACULTY: Olive View-UCLA Departments of Em Pediatrics faculty	ergency Medicine and	3. Gain experience in efficie	ently managing multiple emergency busly (according to the skills of the	
STUDENT COORDINATOR: Adrianna Gonzalez E-MAIL: adgonza	PHONE #: (818) 364-3233 les@dhs.lacounty.gov			
REPORT TO: Olive View-UCLA Medical View Dr., Sylmar, CA Pediatrics Clinic				
COLLEGE AFFILIATION: Acute Care				
AVAILABLE FOR EXTERNS: Yes				

STUDENTS / PERIOD: max 1 min 1

DURATION: 2 or 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS: By Arrangement

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

	STUDENT EXPERI	ENCES	
COMMON PROBLEMS/DISEASES	INPATIENT:	0%	CLOSE CONTACT WITH:
1. Reactive airway disease	OUTPATIENT:	100%	X FULL-TIME FACULTY
2. Abdominal pain/acute abdomen			X CLINICAL FACULTY
Acute infectious disease	CONSULTATION:	0%	FELLOWS
Pediatric fever evaluation	PRIMARY CARE:	100%	X RESIDENTS
5. Minor trauma: including suspected child			INTERNS
abuse			OTHER:
6. Seizures			

7. Toxicology

8. Neonatal emergencies

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 30

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:30 Pediatric Rounds	8:00 – 11:00 EM Conferences 12:00 - 1:00	8:30 – 9:30 Peds Grand Rounds		8:00 – 11:00 EM Conferences
РМ	9:00 a.m. – 4:00 p.m. SCAN Clinic	Peds Noon Conference 1:00 – 8:00 Peds ED	9:30 a.m. – 5:00 p.m. Peds Urgent Care Clinic	1:00 – 8:00 Peds Education 10:00 p.m.– 7:00 a.m. Peds ED Night Shift	12:00 – 4:00 Peds Urgent Confer- ences

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No call, only shifts as described. Saturday or Sunday: 8a.m. – 8 p.m. Peds ED shift.
ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Peds/EM combined Conference on 4th Thursday of EACH MONTH 8:15–9:15; EM Journal Club, 7pm on 3rd Monday of EACH MONTH; Peds Journal Club; 1 paramedic ride-along, (in lieu of shift); 1 day with community health van (in lieu of shift)

PE330.01 PEDIATRIC GASTROENTEROLOGY AND NUTRITION

Subinternship	Loca	tion: UC	CLA	2013-2014 Revised: 12/10/12
COURSE CHAIR: Suzanne McDiarmid, M.D. E-MAIL:	PHONE # : (310) 206-6134	CO 1.	URSE OBJECTIVES (in order of im To teach the diagnosis and managen gastroenterological problems.	
		2.	To teach the diagnosis and managen disease as it affects the pediatric pati	
SUPPORTING FACULTY: Drs. Martin Martin, Jorge Vargas, Da Elizabeth Marcus, and Laura Woznia		3.	To teach indications and contraindica gastroenterology procedures: paneno biopsy, rectal biopsy, liver biopsy, ER tosigmoidoscopy, transhepatic percut	loscopy, small intestinal CP, polypectomy, proc-
STUDENT COORDINATOR: Madeline Verzola	PHONE #: (310) 267-9128	4.	To teach how to perform a nutritional infant or child.	assessment in either an
E-MAIL: mverzo	bla@mednet.ucla.edu	5.	To teach how to prescribe and manage teneded nutrition in infants and childred	
REPORT TO: Friedman Conference Re	oom 12-407 MDCC			
COLLEGE AFFILIATION: Primary Ca	re			
AVAILABLE FOR EXTERNS: Yes				
STUDENTS / PERIOD: may 1 min	1			

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

DESCRIPTION: The subinterns will work primarily in the outpatient setting where they will be exposed to pediatric patients with gastrointestinal, hepatic and nutritional problems. At the completion of the rotation, the subinterns will be required to present a topic of their choice relevant to Pediatric Gastroenterology and Nutrition.

		STUDENT EXPERI	ENCES	
соммс	ON PROBLEMS/DISEASES	INPATIENT:	5%	CLOSE CONTACT WITH:
1. Chro	onic diarrhea	OUTPATIENT:	95%	X FULL-TIME FACULTY
2. Abd	ominal pain			X CLINICAL FACULTY
Acut	te gastroenteritis	CONSULTATION:	100%	X FELLOWS
4. Chro	onic vomiting	PRIMARY CARE:	0%	X RESIDENTS
5. Con	stipation			X INTERNS
	al incontinence			OTHER:
7. Hep	atomegaly/chronic liver disease			

8. Hepatitis

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

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

TYPICAL WEEKLY SCHEDULE

Hour	· Monday Tuesday		Wednesday	Thursday	Friday
АМ	8:00 Morning Report 8:00 GI Clinic (Wozniak)	8:00 Morning Report 8:00 GI Clinic (Vargas)	7:30 TPN Rounds (Haimer 22-426 MDCC) GI Procedures (RRMPU)	7:00 Ped Liver Trans- plant Meeting (Haimer 22-426 MDCC) 8:00 Pediatric Liver Transplant Clinic 8:00 GI Clinic (Marcus)	8:00 Morning Report 8:00 IBD Clinic (Ziring)
РМ	12:00 Noon Lecture 1:00 IBD Clinic (Ziring) 5:00 Liver Biopsy Conference (1P-329 CHS)	1:00 GI Clinic (Vargas) 1:00 Liver Clinic (McDiarmid)	12:00: Noon Conference 1:00 GI Clinic (Venick) 1:00 TPN Clinic (Vargas, Wozniak & Marcus)	12:00 Noon Conf. 1:00 GI Case Conf. 5:00: GI Path Conf. (1P-329 UCLA)	12:30: Adult/Ped Journal Club 1:30: Ped GI Core Lecture (Haimer 22-426 MDCC)

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

PE350.01 YOUNG ADULT MEDICINE

Subinternship	Loca	Location: ASSOC (ASHE CENTER) 2013-2014 Revised: 12/10				
COURSE CHAIR: Mark Ackerman, M.D.	PHONE # : (310) 825-4073	 COURSE OBJECTIVES (in or Learn how to deliver quality ment. 	der of importance) v care in a managed care environ-			
SUPPORTING FACULTY: Drs. M. Dizon, Dawson, Lehrhoff, Ru Flores	man, Gleason, Adler,	 presentation. 3. Ability to function as part of 4. Identify components of med 5. Medical Judgment, Analysis 				
STUDENT COORDINATOR: Mark Ackerman, MD E-MAIL: macker	PHONE #: (310) 825-4073 <u>man@ashe.ucla.edu</u>	Information 6. Learn about young adult de 7. Learn about young adult se issues	ermatological problems. exuality, STD's birth control, sexual			
REPORT TO: Alex Lopez on the 4th Flo Arthur Ashe Student Health and Well of rotation (Clinic) 8:00 AM or before	ness Center, first day	 Develop skill in diagnosis a injuries. 	nd treatment of acute and over use			
COLLEGE AFFILIATION: Primary Car	e					
AVAILABLE FOR EXTERNS: Yes STUDENTS / PERIOD: max 1 min	1					
DURATION: 3 weeks						

2013-2014 ROTATIONS BEGIN WEEKS:

13, 19, 31, 38, 41 only

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

		STUDENT EXPERI	ENCES	
cc	OMMON PROBLEMS/DISEASES	INPATIENT:	0%	CLOSE CONTACT WITH:
1.	Respiratory problems	OUTPATIENT:	100%	FULL-TIME FACULTY
2.	Dermatologic problems			X CLINICAL FACULTY
3.	Minor trauma	CONSULTATION:	20%	FELLOWS
4.	Psychosocial /developmental issues	PRIMARY CARE:	80%	RESIDENTS
5.	Asthma & Allergies			INTERNS
6.	Gastrointestinal problems			OTHER:
7.	Genito-urinary problems			

8. Musculo-skeletal problems

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 40

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	8:00 – 12:00 Primary Care	Primary Care	Primary Care	Primary Care	Primary Care
РМ	Primary Care	Primary Care	Primary Care	Primary Care	Primary Care

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

PE350.03 AMBULATORY PEDIATRICS

Subinternships	s Location: OVH			
COURSE CHAIR: Alan Quillian, M.D. E-MAIL: SUPPORTING FACULTY:	PHONE #: (818) 364-3233	pediatric patients. 2. Diagnose simple as well as c	n history taking and physical examinations in hts. le as well as complex diseases. vith management of acute illnesses in the pedi-	
M. Malekzadeh, G. Defendi, H. Vano	leweghe, R. Molodow		ocedures, including suturing and	
STUDENT COORDINATOR: Adrianna Gonzales	PHONE #: (818) 364-3233			
E-MAIL: adgon:	zales@dhs.lacounty.gov			
REPORT TO: Adrianna Gonzales, Roc UCLA Medical Center, 14445 Olive V 91342	,			
COLLEGE AFFILIATION: Primary Ca	re			
AVAILABLE FOR EXTERNS: Yes				
STUDENTS / PERIOD: max 1 min	1			
DURATION: 3 weeks				
2013-2014 ROTATIONS BEGIN WEEK	KS:			

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

DESCRIPTION: The student will see patients in the Pediatric Clinic and ER at OVMC, under the supervision of faculty physicians. The clinic sees a wide mix of acute and chronic medical problems. If desired, rotations in subspecialty clinics, including Cardiology, Nephrology, Endocrinology and a suspected Child Abuse and Neglect Clinic, may be arranged. Overnight call and attendance at ward rounds are optional.

	STUDENT EXPERIENCES					
со	MMON PROBLEMS/DISEASES	INPATIENT:	5%	CLOSE CONTACT WITH:		
1.	Respiratory tract diseases	OUTPATIENT:	95%	X FULL-TIME FACULTY		
2.	Gastrointestinal diseases			X CLINICAL FACULTY		
3.	Dermatologic diseases	CONSULTATION:	10%	FELLOWS		
4.	Minor Trauma	PRIMARY CARE:	90%	X RESIDENTS		
5.	Communicable diseases			X INTERNS		
6.	Developmental delay			X OTHER: Social workers		
7.	Well Child Care					

8. Child Abuse

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 25

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
	7:45 – 8:30 Ward Rounds	7:45 – 8:30 Ward Rounds	7:45 – 8:30 Ward Rounds	7:45 – 8:30 Ward Rounds	7:45 – 8:30 Ward Rounds
AM	8:30 – 9:00: Conf.	9:00 – 12:00	Grand Rounds	8:30 – 9:00: Conf.	8:30 – 9:00: Conf.
	9:00 – 12:00 Clinical Work	Clinical Work	9:00 – 12:00 Clinical Work	9:00 – 12:00 Clinical Work	9:00 – 12:00 Clinical Work
РМ	1:00 – 5:00 Clinical Work	1:00 – 5:00 Clinical Work	1:00 – 5:00 Clinical Work	1:00 – 5:00 Clinical Work	1:00 – 5:00 Clinical Work

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

PE350.04 ADOLESCENT MEDICINE

		Revised: 12/1012
H ONE #: -5744	differs from that of the child of	adolescent patient and how it or adult.
	causes of morbidity and mor	of puberty. Recognition of its
HONE #:	for STDs and cervical dyspla acute abdomen.	m in both the context of screening asia and in the evaluation of the
-9128 :du	menstrual disorders, sexuall	cluding diagnosis and treatment of y transmitted diseases (males & counseling.
		tion athletic exams and the man- and chronic orthopedic injuries.
	anemia, asthma, chronic sor	olescent problems, such as acne, natic complaints, eating disorders ers, sexually transmitted diseases
d	u	 females), and contraceptive Performance of pre-participa agement of common, acute, Exposure to the common ad anemia, asthma, chronic son hypertension, thyroid disorder

DESCRIPTION: The school-based clinics provide access to common adolescent health problems, while the UCLA Adolescent Medicine Clinic exposes the student to adolescents referred for complex medical problems. In Orthopedic Hospital the students will evaluate patients with common orthopedic and sports medicine problems as well as complex neuromuscular diseases. The UCLA Student Health Center provides opportunities to evaluate common health problems of college-age and young adult populations.

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	0%	CLOSE CONTACT WITH:		
1. Acute infectious disease	OUTPATIENT:	100%	X FULL-TIME FACULTY		
Sexually transmitted disease			X CLINICAL FACULTY		
Dermatologic disorders	CONSULTATION:	0%	X FELLOWS		
4. Menstrual disorders	PRIMARY CARE:	100%	X RESIDENTS		
5. Abnormalities of growth and develop-			X INTERNS		
ment			X OTHER: Nurse practitioner, Physi-		
Substance use and abuse			cian's assistant		
Sports and over-use injuries					

8. Depression

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

19

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	San Fernando High School	San Fernando High School	OFF	San Fernando High School	8:00 – 9:30 Adolescent Lecture 9:30 – 12:00 AM Clnic
РМ	Robert Levine Health Center (RLHC)	Culver City Youth RLHC	RLHC	UCLA Adolescent MD Clinic	UCLA Adolescent Clinic

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

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

PE351.01 AMBULATORY PEDIATRICS

Subinternship	Loca	tion: UCLA	2013-2014 Revised: 12/10/12	
COURSE CHAIR: Shahram Yazdani, MD SUPPORTING FACULTY: Jennifer Balucan, M.D., Paul Chung, J Coker, M.D., M.P.H., Leslie Hamilton, M.D., Martin Kaye, M.D., Carlos Lerne M.D., Angelika Rampal, M.D., Stephe M.P.H., Shahram Yazdani, M.D.	M.D., Irene Hendrickson, er, M.D., Alfred Pennisi,	 newborn, infant, toddler, procent. Basic psychosocial d 2. Improved history, physical opediatric patients. 3. Ability to treat common peomedia, diarrhea, urinary trainary tra	n in different age groups including eschool, school age, and adoles- evelopment. examination, and presentation of liatric problems, including otitis ct infections, asthma, seizures, etc.	
STUDENT COORDINATOR: Madeline Verzola E-MAIL: mverzol	PHONE #: (310) 267-9128 a@mednet.ucla.edu	 Ability to judge seventy of a should be hospitalized. Ability to interpret laborator Knowledge of child abuse a Immunizations in children. 	, , ,	
REPORT TO: 2nd floor of 200 Medical Children's Center @ 8:00 am	Plaza (PCC—		h care team including pediatric	
COLLEGE AFFILIATION: Primary Care AVAILABLE FOR EXTERNS: Yes	9			
STUDENTS / PERIOD: max 1 min	1			
DURATION: 3 weeks				
2013-2014 ROTATIONS BEGIN WEEK 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38,	••			

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

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	0%	CLOSE CONTACT WITH:		
1. Respiratory illness, including pneumonia	OUTPATIENT:	100%	X FULL-TIME FACULTY		
2. Otitis media			X CLINICAL FACULTY		
Diarrhea with/without dehydration	CONSULTATION:	25%	X FELLOWS		
4. Asthma	PRIMARY CARE:	75%	X RESIDENTS		
Seizure disorders			X INTERNS		
Urinary tract infection			OTHER:		
Well child care - immunizations					
9 Trauma (Head and Musaulaskalata)					

 Trauma (Head and Musculoskeletal injuries)

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 25

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 500

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	8:00 – 9:00 Outpatient Conference 9:00 Primary Care Clinic	8:00 – 9:00 Morning Report 9:00 Primary Care Clinic	8:00 – 9:00 Outpatient Conference 9:00 Primary Care Clinic	8:00 – 9:00 Outpatient Conference 9:00 Primary Care Clinic	8:00 – 9:00 Grand Rounds 9:00 Primary Care Clinic
РМ	12:00 – 1:00 Noon Conferences 1:00 – 5:00 Primary Care Clinic **SEE ADDITIONAL	12:00 – 1:00 Noon Conferences 1:00 – 5:00 Primary Care Clinic COMMENTS BELOW	12:00 – 1:00 Noon Conference 1:00 – 5:00 Primary Care Clinic	1:00 – 5:00 Primary Care Clinic	12:00 – 1:00 Noon Conference 1:00 – 5:00 Primary Care Clinic

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Night call once a week, 5 - 11 p.m., in Pediatric Emergency Room

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: **After two weeks the clerk may wish to spend time in subspecialty clinics including cardiology, renal, allergy/immunology, cystic fibrosis, hematology, endocrinology, neurology, etc.

PE360.01 PEDIATRIC NEPHROLOGY

Subinternship	Loca	tion: UCLA	2013-2014 Revised: 12/10/12
COURSE CHAIR: Ora Yadin, M.D. SUPPORTING FACULTY: Pediatric Nephrology Faculty	PHONE #: (310) 206-6987	 renal diseases, in both the Management of the child Learn to integrate theoreti therapies with practical pa Learn to present relevant 	of pediatric patients with a variety of e inpatient and outpatient setting. with End-stage renal disease. ical knowledge of mechanisms and
STUDENT COORDINATOR: Madeline Verzola E-MAIL: mverzol	PHONE #: (310) 267-9128 a@mednet.ucla.edu	technology subject.	resent a seminar on a pediatric- pre- and post-renal transplantation.
REPORT TO: Pediatric Renal Transplar Plaza, 2nd floor at 8:30am	nt Clinic, 200 Med		
COLLEGE AFFILIATION: Urban Unde	rserved		
AVAILABLE FOR EXTERNS: Yes			
STUDENTS / PERIOD: max 1 min	1		
DURATION: 3 weeks			
2013-2014 ROTATIONS BEGIN WEEK	S:		

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

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

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	50%	CLOSE CONTACT WITH:		
1. Nephrotic Syndrome	OUTPATIENT:	50%	X FULL-TIME FACULTY		
2. Hematuria			X CLINICAL FACULTY		
Urinary Tract Infections	CONSULTATION:	10%	X FELLOWS		
4. Chronic Renal Disease	PRIMARY CARE:	90%	X RESIDENTS		
5. Hemodialysis			X INTERNS		
6. Peritoneal Dialysis			X OTHER: Psychosocial Team		
7. Renal Transplantation					
8. Hypertension					
9. Acute Renal Failure					

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

3

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	8:30 – 12:00 Transplant Clinic 200 Med Plaza Module 2	4th Tuesday/mo Bakers- field Clinic 7:00 am MDCC pt. Drop Off 7:30 – 8:30 Adult Neph.Journal Club 200 Med Plaza	1st Wednesday/mo 7:30 am MDCC pt Drop off 9:00 – 12:00 Dialysis Clinic 200 Med Plaza, Module 1	7:00 – 8:00 Renal Grand Rounds Wadsworth VA 9:00 – 12:30, General Nephrology Clinic 200 Med Plaza Module 1	7:15 – 8:15 Pathophysiology Course Wadsworth VA 8:00 - 9:00 Pediatric Grand Rounds 10:00 – 11:00 Dialysis Post Clinic
РМ	1:30 – 3:00 Post-Transplant Clinic (200 Med Plaza)	1:00 – 2:00 Peds Neph. Journal Club/Seminar	12:00 – 1:00 Adult Neph./Ped Neph. Conference		12:00 – 1:00 Didactic Conference 1:00 – 2:00 Patient Sign-Out

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will be required to give one Journal Club/Seminar during the rotation.

PE420.01 PEDIATRIC CRITICAL CARE SUBINTERNSHIP

Subinternship/Inpatient	Loca	tion: HARBOR	2013-2014 Revised: 12/10/12
COURSE CHAIR: Richard Mink, MD, MACM FAX: SUPPORTING FACULTY: Dr. Bonnie Rachman, Dr. Sonho Lee, and	PHONE # : (310) 222-4002 Dr, Tom Kallay	ill infant and child.2. To understand how to manag3. To learn about the types of sh4. To gain a basic appreciation of	linical presentation of a critically e fluids and electrolytes. hock and their treatment. of respiratory distress and/or and its management, including
STUDENT COORDINATOR: Patty Pena FAX: E-MAIL: apena@labio REPORT TO: PICU 6th Floor @ 8:00 a.m.	PHONE #: (310) 222-2343 med.org	 To understand the clinical pre treatment of traumatic injuries To acquire a basic understan hemodynamic support. 	
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

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

STUDENT EXPERIENCES COMMON PROBLEMS/DISEASES INPATIENT: **CLOSE CONTACT WITH:** 100% **Respiratory Failure** OUTPATIENT: 0% X FULL-TIME FACULTY 1. Cardiac Disease CLINICAL FACULTY 2. CONSULTATION: 0% 3. Shock FELLOWS Х 4. Sepsis PRIMARY CARE: 100% Х RESIDENTS 5. Trauma INTERNS

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

OTHER:

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:00–7:30: Sign out re- ceived by PICU residents from Night Float (NF) 7:30–7:45: Morning Report w/ Dr. Jonas (NF) 7:45-8:30: Pre-round 8:30-9:30: Bedside Rds	7:00– 7:30 Sign out received by PICU residents from NF 7:30 – 7:45 Morning Report w/ Dr. Jonas (NF)	7:00– 7:30: Sign out received by PICU resi- dents from NF 7:30 – 7:45: Morning Report w/ Dr. Jonas (NF) 7:45-8:30: Pre-round 8:30-9:30: Bedside	7:00– 7:30: Sign out received by PICU resi- dents from NF 7:30 – 7:45: Morning Report w/ Dr. Jonas -NF 7:45-8:30: Pre-round 8:30-9:30: Pediatric	7-7:30 Signout received PICU residents from NF 7:30-7:45 Morning report w/ Dr. Jonas 7:45-8:30 Pre-Round 8:30-9:30 Clinical Case Conference
РМ	Attending 9:30-9:45: X-Ray Rds 9:45-11:30: Bedside Rds/ Didactic 7:00: PICU resident NF sign-out	7:45-8:30: Pre-round 8:30-11:30 Bedside Rounds/Didactic 7:00 PICU resident NF sign out	Rounds Attending 9:30-9:45: X-Ray Rounds 9:45-11:30: Bedside Rounds/Didactic 7:00 PICU resident NF sign out	Grand Rounds 9:30-12:00: Bedside Rounds/Didactic With Attending 7:00: PICU resident – NF sign out	9:30-11:30 Bedside Rounds w/ Attending 12-3 Resident Confer- ence 7PM PICU resident- Night Float signout

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: In-house overnight call every 4th night (w/a resident). One weekend day, each week. Saturday/Sunday: bedside rounds with attending.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: NOTE: Residents MUST examine their patients and collect appropriate data prior to rounds with senior resident and attending.

PE420.02 PEDIATRIC CRITICAL CARE

Subinternship/Inpatient	Loca	Location: KAISER.SUN	
COURSE CHAIR:	PHONE #:	COURSE OBJECTIVES (in ord	er of importance)
Nilesh Patel, M.D.	(323) 783-7421	1. Clinical assessment of critica	

(323) 783-7421

SUPPORTING FACULTY:

Stephen Johnson, M.D. Director PICU, Raymond Parungao, M.D. and Johnny Luu, M.D.

STUDENT COORDINATOR:

Ashley Versher

PHONE #: (323) 783-7836

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

REPORT TO: Ashley Versher, Center for Medical Education, 4733 Sunset Blvd., West Mezzanine, 3rd Floor @ 8:00 am.

COLLEGE AFFILIATION: Acute Care

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

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

- Clinical assessment of critically ill infants, children, and ado-1. lescents
- Experience with pediatric resuscitation and stabilization of the 2 sick child
- 3. Diagnosis and management of major pediatric illness among critically ill children
- Improved history and physical examination 4.
- Improved clinical judgment, synthesis of information, and skill 5. at common procedures
- 6. Pharmacology of commonly used drugs in children

DESCRIPTION: Students will assume responsibilities similar to those of an intern rotating on the PICU service. The student will be a member of the PICU team, comprised of pediatric house staff and attending pediatric intensivists. Participation in the teaching program will be required, with the student presenting and discussing critically ill patients on a regular basis.

COMMON PROBLEMS/DISEASES

Status Epilepticus 1.

- Status Asthmaticus 2.
- 3. Shock
- 4. Congestive Heart Failure
- 5. Liver Failure
- 6. Renal Failure
- Sepsis

STUDENT EXPERIENCES INPATIENT: 100%

CONSULTATION: PRIMARY CARE:

OUTPATIENT:

CLOSE CONTACT WITH:

- FULL-TIME FACULTY х CLINICAL FACULTY
 - **FELLOWS** RESIDENTS
- х Х INTERNS
 - OTHER:

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4-6

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
	7:30 Pre-Round and begin work	7:30 Pre-Round and	7:30 Pre-Round and begin work	7:30 Pre-Round and begin work	7:30 Pre-Round and begin work
AM	9:30 Attending Rounds	begin work	8:00 Morning Report	9:30 Attending Rounds	8:00 Morning Report
	11:00 Multidisciplinary Rounds	9:30 Attending Rounds	9:30 Attending Rounds	11:00 Multidisciplinary Rounds	9:30 Attending Rounds
РМ	12:00 1:30 pm Pediatric Conference 5:30 Sign-Out Rounds	12:00 1:30 pm Pediatric Conference 5:30 Sign-Out Rounds	12:00 1:30 pm Pediatric Conference Grand Rounds 2—4:30 pm 5:30 Sign-Out Rounds	12:00 1:30 pm Pediatric Conference 5:30 Sign-Out Rounds	12:00 1:30 pm Pediatric Conference 5:30 Sign-Out Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every 4th night, leaving before midnight. Include at least one weekend day, working 8am to 6pm.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Parking is provided. Details during first day orientation in the Center for Medical Education . After first day of orientation and security clearance report to the PICU. This located on the 5th floor of the hospital, section 5300.

100%

E-MAIL: nilesh.j.patel@kp.org

PE440.01 PEDIATRIC HEMATOLOGY-ONCOLOGY SUBINTERNSHIP

Subinternship	Loca	Location: UCLA	
COURSE CHAIR: Theodore Moore, M.D.	PHONE #: (310) 825-6708	history, the orderly investig	rder of importance) f the pathogenesis and natural lation, differential diagnosis and ease processes or problems, such
SUPPORTING FACULTY: Drs. Kathleen Sakamoto, Christopher Denny, Jacqueline Casil-			ease, hemophilia and common solid
las, Brigitte Gomperts		 To learn medical decision and synthesis of informatic 	making: analysis of medical data n.
		3. To learn management of p	roblems in hospitalized patients.
STUDENT COORDINATOR: Madeline Verzola	PHONE #: (310) 267-9128	 To learn and give presenta tology or Oncology at roun 	tion on a topic on Pediatric Hema- ds.
E-MAIL: mverzo	la@mednet.ucla.edu	5. Team approach and utiliza	tion of allied health personnel.
REPORT TO: Morning Report, RRMC at 8:-00am, then 3F ward conference room.			ation of bone marrow aspiration, umbar puncture. Also, the interpre-
COLLEGE AFFILIATION: Academic N	ledicine		
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

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

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:		
1. Leukemia	OUTPATIENT:	0%	X FULL-TIME FACULTY		
2. Solid tumors			X CLINICAL FACULTY		
Sickle cell disease	CONSULTATION:	N/A	X FELLOWS		
4. Anemia	PRIMARY CARE:	N/A	X RESIDENTS		
Bleeding disorders			X INTERNS		
6. Transplants			X OTHER: Allied Health		
Aplastic anemia					

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	8:00 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds 10:30-11:00 Core lectures (Consults)	8:00 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds (Consults)	8:00 – 9:00 Morning Report 9:00 – 10:30 Ward Rounds 10:30-11:00 Core lectures	9:00 – 10:30: Ward Rds 10:30-11:00 Core lectures (Consults)	8:00 – 9:00 Pediatric Grand Rounds 9:00 – 10:30 Ward Rounds (Consults)
РМ	1:30 – 2:30 Psychosocial Rounds	1:00-2:00 Board Review 2:00 – 4:00 Clinical Conference	(Consults) Ward/Patient Work	12:00 – 1:00 Pediatric Research Conference	12:30 – 4:00 Clinic Conference

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: We aim for the student to become proficient in the diagnostic and therapeutic subspecialty procedures (chemotherapy administration, and a familiarity with the pathophysiology of hematology-oncology and the principles of chemotherapy). The student will meet regularly with a member of the Division of review teaching materials and discuss specific subjects. The student will attend the various Division conferences and review topics of current interest with the group. Add'I students at discretion of course chair

PE450.02 PEDIA	TRICS			
Subinternship	Loca	tion: CS	2013-2014 Revised: 8/27/12	
COURSE CHAIR: Arthur Cho, MD	PHONE #: (310) 423-4467	COURSE OBJECTIVES (in ord 1. Managing a mix of "bread ar requiring tertiary and guater	nd butter" inpatients and those	
Stacey Logan, MD	(310) 409-8546	 Knowledge of normal human birth to 18 years. 	n growth and development from	
SUPPORTING FACULTY: Anish Desai, MD; Lee Todd Miller, MD, Stacey Logan, MD		investigation, differential dia	esis and natural history, the orderly gnosis, and management of dis- d adolescents, both inpatient and	
STUDENT COORDINATOR:	PHONE #:	 Improved case presentation and at teaching conferences 	s and discussion on ward rounds	
Esther S. Tolentino (310) 423-4780 x1 E-MAIL: esther.tolentino@cshs.org		relationships between physicers, child-life specialists, and	atient relationships and the inter- hysicians, nurses, social service work- and ancillary personnel to achieve	
REPORT TO: Esther S. Tolent ter, Rm. 4255B, 8:00 a.m.	ino, Cedars-Sinai Medical Cen-	the best in pediatric care.		
COLLEGE AFFILIATION: Primary Care College				
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

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

STUDENT EXPERIENCES				
COMMON PROBLEMS/DISEASES	INPATIENT:	90%	CLOSE CONTACT WITH:	
1. Bronchiolitis, Pneumonia	OUTPATIENT:	10%	X FULL-TIME FACULTY	
2. Asthma			X CLINICAL FACULTY	
Diarrhea and Dehydration	CONSULTATION:	10%	X FELLOWS	
4. Acute Abdomen	PRIMARY CARE:	90%	X RESIDENTS	
5. Seizures			X INTERNS	
Urinary Tract Infections			X OTHER: Social Workers, Nurses,	
7. Hyperbilirubinemia			Dietitians, Child-life Specialists,	
8. Fever, Sepsis			Pharmacists	
9. Renal Disorders				

10. Hem-Onc Disorders

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5 - 8

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 40 - 45

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:30 – 8:00 Sign out 8:00 – 9:00 Morning Report 9:00 – 11:00 Work Rounds	7:30 – 8:00 Sign out 8:00 – 9:00 Morning Report 9:00 – 11:00 Work Rounds	7:30 – 8:00: Sign out 8:00 – 9:00: Morning Report 9:00 – 11:00: Work Rounds	7:30 – 8:00: Sign Out 8:00 – 9:00 Pediatric Grand Rounds & Clin Case Conference 9:00 – 11:00 Work Rounds	7:30 – 8:00: Sign out 8:00 – 9:00 Morning Report 9:00 – 11:00 Work Rounds
РМ	12:15 Noon Teaching Conference	12:15 Noon Teaching Conference 1:30 – 2:30 Attending Rounds with Dr. Miller	12:15 Noon Teaching Conference	12:15 Noon Teaching Conference 1:30 – 2:30 Attending Rounds with Dr. Miller	12:15 Noon Teaching Conference

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One long call each week (Mon-Fri) until 10PM. One night shift (6PM-9AM) each

weekend (at least one Saturday & one Sunday).

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student will meet formally with Dr. Cho (or designee: Dr. Desai or Dr. Logan) at the beginning and end of the rotation.

PE450.04 GENERAL PEDIATRICS

Subinternship/Inpatient	Loca	Location: HARBOR		
COURSE CHAIR: Monica Sifuentes, M.D. SUPPORTING FACULTY: Dr. Paul Fu (Ward Director), other pediat	PHONE #: (310) 222-3080 ric faculty	 Improve concepts of patier Diagnose and manage con sepsis, respiratory distress Develop sophisticated difference 	y and physical examination. It evaluation and management. Inplex inpatient problems, such as	
STUDENT COORDINATOR: Patty Pena E-MAIL: apena@lab REPORT TO: 6th Floor – Room 42	PHONE #: (310) 222-2343 iomed.org	 Acquire proficiency with co Improve oral presentations issues. Improve methods for retrier cal literature. 	mmon pediatric procedures. of patient problems and clinical val of pertinent data from biomedi-	
COLLEGE AFFILIATION: Primary Care		 Recognize the important ro in patient care. 	oles of all health care professionals	
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			

DESCRIPTION: The student will function as a sub-intern, assuming the duties and responsibilities of a pediatric intern, including night call every four evenings, but with a lighter patient load. Students will be assigned to the Children's Ward.

STUDENT EXPERIENCES						
COMMON PROBLEMS/DISEASES 1. Acute respiratory disorders 2. Acute gastroenteritis & dehydration	INPATIENT: OUTPATIENT:	90% 10%	CLOSE CONTACT WITH: X FULL-TIME FACULTY X CLINICAL FACULTY			
 Emergent trauma Acute pediatric surgical conditions Serious infections Growth, developmental & nutritional disorders Congenital heart disease 	CONSULTATION: PRIMARY CARE:	0% 100%	X FELLOWS X RESIDENTS X INTERNS OTHER:			

8. Acute neuro., hemato., endo., renal & genetic disorders of infancy, childhood & adolescence

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
АМ	7:30 – 8:30: Intake Rounds 8:30 – 11:30: X-ray Conference & Attending Rounds	7:30 – 8:30: Intake Rounds 8:30 – 10:30 Attending Rounds	7:30 – 8:30: Intake Rounds 8:30 – 11:30: X-ray Conference & Attending Rounds	7:30 – 8:30: Intake Rounds 8:30 – 9:30 Pediatric Grand Rounds 10:30 – 12:00 Attending Rounds	77:30 – 8:30: Intake Rounds 8:30 – 9:30: Case Conference 10:30 – 12:00: Attending Rounds
РМ	New patient workups	New patient workups	New patient workups	New patient workups	New patient workups

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: One in seven days off, averaged over three weeks.

PE452.02 PEDIATRICS

COLLEGE AFFILIATION: Primary Care

weeks 2013-2014 ROTATIONS BEGIN WEEKS:

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

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

DURATION: 3

Subinternship/Inpatient	Loca	ocation: KAISER.SUN		2013-2014 Revised: 12/10/12	
COURSE CHAIR: PHONE #: Nilesh Patel, M.D. (323) 783-7421 E-MAIL: nilesh.j.patel@kp.org		CO 1.	DURSE OBJECTIVES (in order of importance) Experience with a wide variety of acute and chronic inp pediatric cases		
Christopher Grybauskas, M.D. (323) 783-6243 E-MAIL: <u>christopher.k.grybauskas@kp.org</u>		2.	Diagnosis and management of maj	or pediatric illnesses.	
		3.	Exposure to a unique type of delive health plan).	ery of health care (prepaid	
SUPPORTING FACULTY:		4.	An approach to the ill child.		
Tim Degner, M.D., Chief, Dept. of P	ediatrics, Steven Woods,	5.	Improved history and physical exar	nination.	
M.D., and Staff		6.	Enhanced judgment, analysis of me	edical data, and synthesis	
STUDENT COORDINATOR:	PHONE #:		of information.		
Ashley Versher	(323) 783-7076	7.	An increased familiarity with technic	ques and procedures.	
E-MAIL: ashley.	e.versher@kp.org	8.	Utilization of the health care team.		
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		9.	9. Medical record keeping.		
		10.	Knowledge of the pharmacology of pediatrics.	drugs commonly used in	

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

STUDENT EXPERIENCES						
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:			
Infection of CNS Status Asthmaticus	OUTPATIENT:	0%	X FULL-TIME FACULTY CLINICAL FACULTY			
3. Acute & Chronic Gastro-enteric diseases	CONSULTATION:	0%	FELLOWS			
 Pneumonia & other Respiratory infec- tions 	PRIMARY CARE:	100%	X RESIDENTS X INTERNS			
5. Oncological diseases			X OTHER: **			
Acute and Chronic surgical diseases						
 Pediatric ICU Cases Neurological & Neurosurgical Diseases 						
Neurological & Neurosurgical Diseases						

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:

TYPICAL WEEKLY SCHEDULE

50

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:30 – 8:30: Work Rounds w/ House Staff 8:30 – 11:00: Patient Workups & Care 11:00 – 12:00 : Attending Rounds	7:30 – 8:30: Work Rounds w/ House Staff 8:30 – 12:00: Patient Workups & Care	7:30 – 8:30: Work Rounds w/ House Staff 8 – 9: Morning Report 8:30 – 11:00: Patient Workups & Care 11:00 – 12:00 : Attending Rounds	7:30 – 8:30: Work Rounds w/ House Staff 8:30 – 12:00: Patient Workups & Care	7:30 – 8:30: Work Rounds w/ House Staff 8:00 – 9:00: Morning Report 8:30 – 11:00: Patient Workups & Care 11:00–12:00 : Attending Rounds
РМ	12:00 – 1:30 Peer Review Conference 1:30 – 4:00 Patient Workups & Care 4:00 – 5:00 Sign Out Rounds w/ House Staff	12:00 – 1:30 Resident Conference 1:30 – 4:00 Patient Workups & Care 4:00 – 5:00 Sign Out Rounds w/ House Staff	2:00 – 4:30 Pediatric Grand Rounds* 4:30 – 5:30 Sign Out Rounds w/ House Staff	12:00 – 1:30 Resident Conference 1:30 – 4:00 Patient Workups & Care 4:00 – 5:00 Sign Out Rounds w/ House Staff	12:00 – 1:30 Pediatric Resident Journal Club 1:30 – 4:00 Patient Workups & Care 4:00 – 5:00 Sign Out Rounds w/ House Staff

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every 4th night, leaving before midnight. Include at least one weekend day, working 8am to 6pm.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Parking is provided. Details during first day orientation in the Center for Medical Education . After first day of orientation and security clearance report to the PICU. This located on the 5th floor of the hospital, section 5300.

PE455.03 PEDIATRIC INTENSIVE CARE UNIT SUBINTERNSHIP

Subinternship	Locat		A	2013-2014 Revised: 12/10/12	
COURSE CHAIR: Rick Harrison, M.D.	PHONE #: (310) 825-4128	COU 1.	IRSE OBJECTIVES (in order of imp Improved history and physical examin- dren.	<i>'</i>	
SUPPORTING FACULTY:		2.	Synthesis of history, physical examination into a differential diagnosis.	tion, and laboratory data	
Judith Brill, M.D., Irwin Weiss, M.D., Andr Myke Federman, M.D., Robert Kelly, M.D		3.	Ability to analyze condition of patient a therapeutic plans for complex ICU pro		
		4.	 Learn and/or improve procedures, including IV's, lur ture, arterial catheters, and intubation. 		
STUDENT COORDINATOR:	PHONE #:	5.	Improve patient presentations.		
Madeline Verzola E-MAIL: mverzola@	(310) 267-9128 mednet.ucla.edu	6.	 Integrate basic ventilator function into therapy of r failure. 		
		7.	Utilize physiologic principles to guide of	clinical interventions.	
REPORT TO: UCLA Pediatric Intensive Car RR-UCLA Med. Ctr., 7:00 a.m.	e Unit, Rm. 5400	8.	Work as part of a health care team, ut professionals as appropriate.	lizing other health care	
COLLEGE AFFILIATION: Urban Underser		9.	Appreciate cost effectiveness of variou logic examinations.	us laboratory and radio-	
COLLEGE AFFILIATION: Orban Underser	ved	10.	Understand psychosocial issues relate ill children.	ed to caring for critically	
AVAILABLE FOR EXTERNS: Yes					
STUDENTS / PERIOD: max 1 min 1 (2 w/approval by dir. only)				
DURATION: 3 weeks (for 2 weeks	use Drop/Add Petition after	r June 5,	2007)		
2013-2014 ROTATIONS BEGIN WEEKS: 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38, 41,	44, 47				

DESCRIPTION: The pediatric intensive care unit (PICU) at UCLA is an 18-bed multidisciplinary intensive care unit. The PICU Service follows all patients in the PICU often with multiple other medical and/or surgical services involved. The service consists of one faculty member, one PICU fellow, two senior pediatric residents, one emergency medicine resident, and one anesthesia resident, in addition to the medical student(s) on the team.

STUDENT EXPERIENCES					
COMMON	N PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:	
1. Respi	ratory failure	OUTPATIENT:	0%	X FULL-TIME FACULTY	
2. Shock	(CLINICAL FACULTY	
3. Sepsi	S	CONSULTATION:	50%	X FELLOWS	
4. Liver	failure	PRIMARY CARE:	50%	X RESIDENTS	
5. Comp	lex congenital heart disease			X INTERNS	
6. Seizu	res			X OTHER: Respiratory Therapists,	
7. Traum	าล			Nurses	
8. Orgar	n transplantation				

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

3

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	6:30 – 7:30	6:30 – 7:00 - Pre-Rounds	6:30 – 7:30 - Pre-Rnds	6:30 – 7:00	6:30 - 7:30
	Pre-Rds	7:00 – 7:30 - Lecture	7:00 – 8:30 &	Pre-Rounds	Pre-Rounds
	7:30 – 10:00	7:30 – 10:00	9:00 – 10:30	7:00 – 7:30	7:00 - 10:30
	Morning Rds	Morning Rounds	Morning Rounds	Lecture	Morning Rounds
	10:00 – 11:30	10 – 11:30	8:30 – 9:00: PICU Pa-	7:30 – 10:00	11:30 - 12:00
	Patient Care	Patient Care	tient Presentation	Morning Rounds	X-ray Rounds
	11:30 – 12:00	11:30 – 12:00	11:30 - 12: X-ray Rnds	10 –11:30	12:00 -1:00
РМ	X-ray Rds	X-ray Rounds	12:00 – 1:00	Patient Care	Peds Noon Conf.
	12:00 –1:00	12:00 –1:00	Peds Noon Conf.	11:30 - 12:00	1:00 – 2:00 & 3:00 –
	Peds Noon Conf.	Peds Noon Conf.	1:00 - 5:00: Patient Care	X-ray Rounds	5:00 Patient Care
	1:00 – 5:00	1:00 – 5:00	2:00 – 3:00	1:00 - 5:00	2:00 – 3:00
	Patient Care	Patient Care	PICU Lecture	Patient Care	PICU Lecture
	5:00 – 6:30	5:00 – 6:30	5:00 – 6:30	5:00 - 6:30	5:00 – 6:30
	Evening Rounds	Evening Rounds	Evening Rounds	Evening Rounds	Evening Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One night call per week. On weekends, student is expected to round on his/her patients, provide daily care, write daily notes, and then may check out to senior resident.

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

PE485.01 **NEONATAL MEDICINE**

Subinternship/Inpatient	Subinternship/Inpatient Loca			8-2014 ised: 12/10/12	
COURSE CHAIR: Vedang Londhe, M.D.	PHONE #: (310) 825-5850	CO 1.	URSE OBJECTIVES (in order of importance Learn major newborn diseases: pathophysiolo and outcome.	,	
SUPPORTING FACULTY: Neonatology Faculty, Sherin Devaskar, M.D., and Uday Devas- kar, M.D.		2.	 Observe and/or participate in most frequent procedures: re suscitation, intubation, umbilical line placement, venipunct I.V. placement, thoracentesis, chest tube placement, ex- change transfusion. 		
		3.	3. Be primary physician for assigned sick infants.		
STUDENT COORDINATOR:	PHONE #:	4.	Learn the presentation and exam of normal ne how to identify/differentiate abnormalities on e		
Madeline Verzola	(310) 267-9128	5.	Learn to interact with parents/family of critically	ily of critically il infants and	
E-MAIL: mverzola	@mednet.ucla.edu		provide psychosocial support.		
REPORT TO: Fellow or Senior Resident, Care Unit Mattel Children's Hospital, 5 8:00 a.m.					
COLLEGE AFFILIATION: Urban Unders	served				
AVAILABLE FOR EXTERNS: Yes					

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS:

- By Arrangement
- DESCRIPTION: This elective gives medical students the fundamentals of the presentation and underlying pathophysiology of problems related to the health and well-being of the fetus and neonate. Students the fundamentals of the presentation and underlying participhysiology of proteins related to the health and well-being of the fetus and neonate. Students develop a special competence and understanding of the basic pathology of critically ill term and preterm neonates related to neurologic, respiratory, cardiovascular, hematologic, infectious, gastroenterologic, endocrine, renal, psy-chosocial and developmental issues. The curriculum reflects our commitment to provide medical students the clinical experience necessary to gain an understanding of health care delivery for routine and complex neonatal disorders. Our philosophy is to 1) teach neonatal pathology through clinical application; 2) integrate basic science teaching into clinical instruction; and 3) provide abundant opportunities for learning through didactic rounds, lectures and conferences. Students will be encouraged to present their cases during daily rounds with the NICU health care team.

STUDENT EXPERIENCES						
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:			
 Respiratory distress syndrome 	OUTPATIENT:	0%	X FULL-TIME FACULTY			
2. Congenital malformations			CLINICAL FACULTY			
Congenital heart disease	CONSULTATION:	0%	X FELLOWS			
4. Prematurity	PRIMARY CARE:	100%	X RESIDENTS			
Perinatal asphyxia			INTERNS			
6. Jaundice			OTHER:			
7. Cyanoss			o men.			
8. Jitteriness/seizures						

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

3

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	7:00 - Prerounds 8:00 - Teaching Lecture 8:30 - 10:30 - Teaching Rounds 11:00 - Radiology Rnds	7:00 - Prerounds 8:00 - Teaching Lecture 8:30 - 10:30 - Teaching Rounds 11:00 - Radiology Rnds	7:00 - Prerounds 8:00 - Teaching Lecture 8:30 - 10:30 - Teaching Rounds 11:00 - Radiology Rnds	7:00 - Prerounds 8:00 - Teaching Lecture 8:30 - 10:30 - Teaching Rounds 11:00 - Radiology Rnds	7:00 - Prerounds 7:30 - Teaching Rnds 8:00 - Pediatric Grand Rounds 9:00 – 10:30 - Teaching Rnds (cont'd) 11:00 - Radiology Rnds
РМ	12:00 - Resident Lecture 1:00 – 5:00 - NICU Work 5:00 - Sign-Out Rounds	12:00 - Neonatology Conf. 1:00 – 5:00 - NICU Work 5:00 - Sign-Out Rounds	12:00 - Resident Lecture 1:00 – 5:00 - NICU Work 5:00 - Sign-Out Rounds	12:00 - Resident Lec- ture 1:00 – 5:00 NICU Work 5:00 - Sign-Out Rounds	12:00 - Resident Lec- ture 1:00 – 5:00 NICU Work 5:00 - Sign-Out Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night until 10:00 p.m.

PE485.02 NEONATOLOGY

Subinternship/Inpatient

COURSE CHAIR: PHONE #: COURSE OBJECTIVES (in order of importance) (310) 423-4434 Charles F. Simmons, M.D. Become familiar with and competent in managing common 1. neonatal disease. Kurlen Payton, M.D. (310) 423-4423 Enteral and parenteral nutrition. 2 Anuj Desai, M.D. (310) 423-4423 3. Develop competence in delivery room resuscitation. SUPPORTING FACULTY: Develop competence in stabilization and transport of high risk 4. Drs. Asha Puri, William Binder, Heather Cahan, Nirupa Reddy, newborns. Jeremy Perlman, Alan Chin, Sarah Greene STUDENT COORDINATOR: PHONE #: Esther S. Tolentino (310) 423-4780 E-MAIL: tolentinoe@cshs.org

REPORT TO: Esther S. Tolentino, Cedars-Sinai Medical Center, Rm. 4255B, 8:00 a.m.

COLLEGE AFFILIATION: Academic Medicine

AVAILABLE FOR EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2013-2014 ROTATIONS BEGIN WEEKS: By Arrangement

, ,

DESCRIPTION: The Neonatal Intensive Care Unit is a state-of-the-art 45-bed unit. Students participate in attending and multidisciplinary discharge rounds, as well as a wide variety of teaching activities (including daily afternoon lectures given by neonatology faculty, housestaff noon lectures, weekly Pediatric Case Conference and Grand Rounds). Students interact with a wide variety of pediatric consultants and services, and participate in the care of both term and preterm infants with diagnosis ranging from congenital heart disease, meconium aspiration, genetic syndromes, to apnea and bradycardia, respiratory distress syndrome, HIE and cooling, and intraventricular hemorrhage, among others. Students will be exposed to fluid and electrolyte management, metabolic and nutrition disorders, cardiorespiratory management, and management of infection. Students will attend high risk deliveries with the neonatal team/

Location: CS

2013-2014

Revised: 12/10/12

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	100%	CLOSE CONTACT WITH:		
 Hyperbilirubinemia Prematurity 	OUTPATIENT:	0%	X FULL-TIME FACULTY X CLINICAL FACULTY		
 Respiratory distress Neonatal infection Congenital anomalies Birth asphyxia/trauma 	CONSULTATION: PRIMARY CARE:	0% 100%	X FELLOWS X RESIDENTS X INTERNS X OTHER: Social worker, dietitian		

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3 - 4

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 8 - 16

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	8:00: Sign-in Rounds 8:30 – 10:30 Attending Rounds	8:00: Sign-In Rounds 8:30 – 11:30 Attending Rounds	8:00: Sign-in Rounds 8:30 – 10:30 Attending Rounds 11:00 - 12:00 Maternal Fetal Med Joint Conference/Journal Club	7:30: Sign-In Rounds 8:00 – 9:00 Pediatric Grand Rounds 9:00 – 11:30 Attending Rounds	8:00: Sign-In Rounds 8:30 – 11:30 Attending Rounds 11:00 - 12:00 Neonatal Didactic Lecture
РМ	12:00 Didactic Conference 2:00 - 3:00: Neonatal Didactic Lecture 1:00 - 4:00 Physical Exam & Progress Notes	12:00: Didactic Conference 1:00 - 3:00: Physical Exam & Progress Notes 3:00 - 4:00: Didactic Neo- natal Conference	12:00: Didactic Conference 1:00 – 3:00: Physical Exam & Progress Notes 3:00 – 4:00: Didactic Neonatal Conference	12:00: Didactic Conference 1:00 - 4:00: Physical Exam & Progress Notes	12:00: Didactic Conference 2:00 - 3:00 Neonatal Didactic Lecture 1:00 - 4:00 Physical Exam & Progress Notes

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Three night shifts with Delivery Room, Well Baby Nursery Team.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Student to present one Neonatal lecture to the resident team in the 3 week rotation.

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PE485.03 **NEONATOLOGY**

Subinternship/Inpatient	Loca	tion: K	AISER.SUN	2013-2014 Revised: 1/13/12	
Christopher Grybauskas, M.D.	, , ,	CC 1. 2. 3. 4. 5. 6.	tation and stabilization of the s Diagnosis and management of Continuing care of premature i	n infants. n emphasis on neonatal resusci ick newborn. f the acutely ill newborn. nfants. nthesis of information, and skill	
STUDENT COORDINATOR: Ashley Versher E-MAIL: ashley REPORT TO: Ashley versher, Clerksh Center for Medical Education, 4733 Validated parking next door at 4715 COLLEGE AFFILIATION: Urban Und	Sunset Blvd., 3rd Floor. Sunset Blvd				

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

2042 2044

DESCRIPTION: Students will assume responsibilities of an acting PL1 on the lower acuity care service. Other members of the service may include pediatric, family practice, and obstetrical interns, an attending neonatologist general peds faculty.

STUDENT EXPERIENCES **COMMON PROBLEMS/DISEASES** INPATIENT: 100% **CLOSE CONTACT WITH:** Normal Newborn Assessment OUTPATIENT: 0% Х FULL-TIME FACULTY 1. 2. Prematurity CLINICAL FACULTY 3. Sepsis Neonatorum CONSULTATION: 0% **FELLOWS** Х 4. Hyaline Membrane Disease PRIMARY CARE: 100% Х RESIDENTS Transient Tachypnea 5. Х INTERNS 6. Apnea of Prematurity Х OTHER: See additional comments 7. Congenital/Chromosomal anomalies 8. Labor and delivery room experience

Neonatal Resuscitation 9.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4 - 6

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

TYPICAL WEEKLY SCHEDULE

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
	7:30 - Pre-Round and begin work	7:30 - Pre-Round and begin work	7:30 - Pre-Round and begin work	7:30 - Pre-Round and begin work	7:30 - Pre-Round and begin work
АМ	8:00 Sign-In Rounds	8:00 Sign-In Rounds	8:00 Morning Report	8:00 Sign-In Rounds	8:00 Morning Report
	9:30 - X-ray Rounds	9:30 - X-ray Rounds	9:30 - X-ray Rounds	9:30 - X-ray Rounds	9:30 - X-ray Rounds
	10:00 Attending Rnds	10:00 Attending Rnds	10:00 Attending Rnds	10:00 Attending Rnds	10:00 Attending Rnds
РМ	12:00 – 1:30 Pediatric Conference 4:30 Sign-Out Rounds	12:00 – 1:30 Pediatric Conference 4:30 Sign-Out Rounds	12:00 – 1:30 Pediatric Conference 2 – 4:30 Grand Rounds 4:30 Sign-Out Rounds	12:00 – 1:30 Pediatric Conference 4:30 Sign-Out Rounds	12:00 – 1:30 Pediatric Conference 4:30 Sign-Out Rounds

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every 4th night, leaving before midnight. Include at least one weekend day, working 8am to 6pm.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Parking is provided. Details during first day orientation in the Center for Medical Education . After first day of orientation and security clearance report to the NICU. This located on the 4th floor of the hospital.

PE485.04 NEONATOLOGY ICU PATIENT MANAGEMENT

Subinternship/Inpatient	Loca	tion: HARBOR	2013-2014 Revised: 12/10/1:	
COURSE CHAIR: Virender Rehan, M.D.	PHONE #: (310) 222-1975	 COURSE OBJECTIVES (in 1. Experience in the prima tal disease as a membe 	ry management of complicated neon	
SUPPORTING FACULTY: Lynne Smith, M.D., Virender Rehan, M	.D.	with RDS and other lung	nent of tiny premature infants, infants g disease, infants with sepsis, post- gement, and neonatal asphyxia.	
		3. Knowledge of approach	es to neonatal nutrition.	
		4. Experience participating	g in neonatal transport.	
STUDENT COORDINATOR: Patty Pena	PHONE #: (310) 222-2343		g umbilical artery catheterization, chest tubes, and other procedures in	
E-MAIL: apena@labiomed.org		6. Experience in interacting	nce in interacting with parents with sick infants.	
		7. Experience in delivery re	oom resuscitation techniques.	
REPORT TO: 6th Floor Lobby Office – 8:	00 a.m.	 Experience in dealing w surround the care of the 	vith the complex ethical issues that e tragic infant.	
COLLEGE AFFILIATION: Primary Care		 The opportunity to integ tal histories. 	rate complicated obstetric and neona	
AVAILABLE FOR EXTERNS: Yes				
STUDENTS / PERIOD: max 1 min	1			
DURATION: 3 weeks				
2013-2014 ROTATIONS BEGIN WEEKS By Arrangement	:			
DESCRIPTION: Students will participate	as a full member of the NIC	J team. They will be assigned pa	atients, and they will be the primary	

DESCRIPTION: Students will participate as a full member of the NICU team. They will be assigned patients, and they will be the primary care provider for their patients. They will be closely supervised by the resident, fellow, and faculty member. They will attend teaching rounds, work rounds, conferences and take night calls.

STUDENT EXPERIENCES					
COMMON PROBLEMS/DISEASES	INPATIENT:	95%	CLOSE CONTACT WITH:		
1. Premature infants	OUTPATIENT:	5%	X FULL-TIME FACULTY		
2. RDS			CLINICAL FACULTY		
Other neonatal lung diseases	CONSULTATION:	0%	X FELLOWS		
Neonatal asphyxia	PRIMARY CARE:	100%	X RESIDENTS		
Bilirubin problems			INTERNS		
Nutritional problems			OTHER:		
Neonatal surgery			official.		
Congenital malformations					

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	Work Rounds Faculty Teaching Rounds Neonatal X-Ray Conf. Patient Care	Work Rounds Faculty Teaching Rounds Patient Care	Work Rounds Prenatal Case Conf. Neonatal X-Ray Conf. Patient Care	Work Rounds Grand Rounds Patient Care	Work Rounds Chief's Rounds Neonatal X-Ray Conf. Patient Care
РМ	Patient Care Faculty Teaching Rounds	Patient Care Faculty Teaching Rounds	Patient Care Faculty Teaching Rounds	Faculty Teaching Rounds Patient Care	High-Risk Neonatal Follow-up Clinic

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

PE485.06 NEONATAL-PERINATAL MANAGEMENT

FE405.00 NEONATAL				
Subinternship/Inpatient	Loca	Location: HARBOR		
COURSE CHAIR: Virender Rehan, M.D.	PHONE #: (310) 222-1975	 COURSE OBJECTIVES (in order Experience in management or infants as a member of the number 	f intermediate level newborn	
SUPPORTING FACULTY: Lynne Smith, M.D., Julie Noble, M.D.	., Virender Rehan, M.D.	 Experience in neonatal resust Experience in correlating neon histories and maternal disease 	natal disease with obstetric	
		 Caring for patients with neona prematurity, apnea of prematu tal abnormalities, heart diseas 	urity, suspected sepsis, congeni	
STUDENT COORDINATOR: Patty Pena	PHONE #: (310) 222-2343	 Experience in performing arte septic workup, intubation. 	rial catheterization, spinal tap,	
E-MAIL: apena@labiomed.org		6. Experience in the care of grow	ving premature infants.	
REPORT TO: 6th Floor Lobby Office – 8:00 a.m.		 Learning the skills to distingui infants. Taking night call in the neona 	sh sick from suspect newborn tal ICU.	
COLLEGE AFFILIATION: Primary Car	re			
AVAILABLE FOR EXTERNS: Yes				
STUDENTS / PERIOD: max 1 min	1			
DURATION: 3 weeks				
2013-2014 ROTATIONS BEGIN WEEK 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 38,				
		and a state of the second s	in a data and a second state of the	

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

STUDENT EXPERIENCES						
COMMON PROBLEMS/DISEASES	INPATIENT:	95%	CLOSE CONTACT WITH:			
1. Premature infants	OUTPATIENT:	5%	X FULL-TIME FACULTY			
Neonatal resuscitation			CLINICAL FACULTY			
Suspected sepsis	CONSULTATION:	0%	X FELLOWS			
Mild neonatal lung disease	PRIMARY CARE:	100%	X RESIDENTS			
Congenital malformation			INTERNS			
Bilirubin problems			OTHER:			
Weight gain in premature infants			OTHER.			
8. Hypoglycemia						

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:

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

TYPICAL WEEKLY SCHEDULE

8

Hour	Monday	Tuesday	Wednesday	Thursday	Friday
АМ	OB Case Conference Neonatal X-ray Conf. Patient Care Faculty Attending Rounds	Work Rounds Patient Care Faculty Attending Rounds	Work Rounds Perinatal Case Conf. Neonatal X-ray Conf. Patient Care	Work Rounds Grand Rounds Patient Care	Work Rounds Chief's Rounds Neonatal X-ray Conf. Patient Care
РМ	Faculty Teaching Rounds	Patient Care	Faculty Attending Rounds Patient Care	Faculty Attending Rounds Patient Care	High-Risk Infant Follow-up Clinic

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