In-Depth Location: CHS 1998-99

COURSE CHAIR: Raymond Ulmer, Ph.D. PHONE #: (213)-933-6609

LEARNING OBJECTIVES (in order of importance)
1. Operationally define and assess all aspects of both compliance and noncompliance to medical regimens.
2. Report the 10 common compliance elements of all preventive, diagnostic, treatment, and continuing care regimens.
3. Identify the minimum level of patient compliance needed for effective medical treatment of most chronic diseases.
4. Describe the inter-relationships between health related behaviors (life style) and compliance/noncompliance.
5. Specify ways of reducing malpractice risks by improving patient compliance.
6. Cite four necessary criteria for identifying a patient as noncompliant.
7. Discuss nine major sets of reasons for patient noncompliance.
8. Detail the specific compliance problems of cancer, cardiac, diabetic, and epileptic patients.
9. Report four major approaches to preventing, reducing, and monitoring patient noncompliance.
10. Discuss predictable future medical care developments and their effects on medical concerns for patient noncompliance problems.

LOCATION: CHS
__________________________________________________________________________________________________________________________________
COURSE CHAIR: PHONE #:
Raymond Ulmer, Ph.D. (213)-933-6609

SUPPORTING FACULTY: None

STUDENT COORDINATOR: PHONE #:
Raymond Ulmer, Ph.D. (213)-933-6609

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Cancer
2. Diabetes
3. Hypertension
4. Epilepsy
5. Ulcers
6. Geriatric patients
7. Pediatric patients
8. Psychiatric patients

INPATIENT: N/A%
OUTPATIENT: N/A%
CONSULTATION: N/A%
PRIMARY CARE: predominately
CLOSE CONTACT WITH:
FULL TIME FACULTY
X CLINICAL FACULTY
FELLOWS
RESIDENTS
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: N/A
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: N/A

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>Write a paper using the literature in that area. Readings</td>
<td>a patient compliance area. Readings</td>
<td>area of their choice, include handouts</td>
<td>surveying and analyzing the reference books.</td>
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<tr>
<td>PM</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

DESCRIPTION: This course will include highly specified assessments of all aspects of patient compliance problems. Emphasis will be on preventing, monitoring, and reducing noncompliance problems for chronic disease regimens, such as: cancer, hypertension, cardiac conditions, diabetes, ulcers, epilepsy, and end stage renal diseases. The student will develop a clear ability to predict noncompliance upon diagnosis of chronic or acute disease or injury.
LEARNING OBJECTIVES (in order of importance)
1. Discussing the clinical symptoms, diagnosis, and treatment of the major diseases found in the tropics.
2. The microscopic identification of parasites pathogenic to man.
3. Discussing the life cycles and epidemiology of parasitic infections.
4. Issues affecting the health and health care of mothers and children.
5. Nutrition and its impact on health in the tropics.
6. Managing patients traveling to and returning from the tropics.
7. The current research efforts and health projects within the field.
8. Tropical diseases and their impact on economic and agricultural development.
9. The traditional medicine system in developing countries.
10. Understanding the health care delivery systems in developing countries.
11. Discussing opportunities in international health training and research.

DESCRIPTION: The course is intended to interest medical students in tropical medicine and international health. It’s designed to broaden their didactic knowledge, clinical experience, research awareness, and laboratory competency in tropical medicine. In addition to clinical didactics, specific emphasis will focus on the unique social and economic problems of patient care in the tropics.

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: N/A%</th>
<th>OUTPATIENT: N/A%</th>
<th>CONSULTATION: N/A%</th>
<th>PRIMARY CARE: N/A%</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Malaria</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X FULL TIME FACULTY</td>
</tr>
<tr>
<td>2. Schistosomiasis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X CLINICAL FACULTY</td>
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<tr>
<td>3. Intestinal parasites/Diarrheal disorders</td>
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<td></td>
<td></td>
<td>FELLOWS</td>
</tr>
<tr>
<td>4. Tropical dermatoses</td>
<td></td>
<td></td>
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<td></td>
<td>RESIDENTS</td>
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<tr>
<td>5. Nutritional disorders</td>
<td></td>
<td></td>
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<td></td>
<td>INTERNS</td>
</tr>
<tr>
<td>6. Health of pregnant &amp; lactating women</td>
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<td></td>
<td></td>
<td>X OTHER</td>
</tr>
<tr>
<td>7. Communicable childhood diseases</td>
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<tr>
<td>8. Delivery of health care in socially &amp; economically deprived countries.</td>
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</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: N/A
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: N/A

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:30 - 9:30</td>
<td>8:30 - 10:30</td>
<td>8:30 - 10:30</td>
<td>8:30 - 10:30</td>
<td>8:30 - 10:30</td>
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<tr>
<td></td>
<td>Course introduction</td>
<td>Malaria seminar</td>
<td>Schistosomiasis seminar</td>
<td>Filarisis</td>
<td>Child survival issues</td>
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<td></td>
<td>9:30- 10:00</td>
<td>10:30 - 12:30</td>
<td>11:30 - 12:30</td>
<td>11:30 - 12:30</td>
<td>11:30 - 12:30</td>
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<tr>
<td></td>
<td>Health system</td>
<td>Malaria slide review</td>
<td>Schistosomiasis slide review tropical ophthalmopathy</td>
<td>Filarisis slide review</td>
<td>Nutrition seminar</td>
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<tr>
<td></td>
<td>10:45-11:45</td>
<td></td>
<td></td>
<td></td>
<td>Diarrheal disorders</td>
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<td></td>
<td>Social &amp; economic problems of patients</td>
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<td>1:30 - 3:00</td>
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<td>1:30 - 3:30</td>
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<td></td>
<td>Traditional health practices</td>
<td>Laboratory session research</td>
<td>African Trypanosomiasis; Diagnostic Laboratory</td>
<td>Laboratory session amebiasis</td>
<td>Health issues of pregnant and lactating women</td>
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<tr>
<td></td>
<td>3:15 - 4:30</td>
<td>4:00 - 5:00</td>
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<td>4:00 - 5:00</td>
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<tr>
<td></td>
<td>Infrastructures and Health care</td>
<td>Journal review</td>
<td></td>
<td></td>
<td>Leprosy and TB</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:
ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship  

Location: CHS  

1998-99

COURSE CHAIR: Andrew Saxon, M.D.  
PHONE #: (310)-206-8050

SUPPORTING FACULTY:  
Andre E. Nel, M.D.  (310) 825-6620  
Adrian Casillas, M.D.  (310) 825-1153

STUDENT COORDINATOR: Yanina Venegas  
PHONE #: (310)-825-3718

REPORT TO:  
TBA, 52-175 CHS, 8:00 am.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of disorders of immune regulation in humans.
2. Basic science foundation of immunopathophysiologic mechanisms.
3. How to structure an approach to a clinical problem.
4. Library research and interpretation of literature to address a research issue.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Asthma
2. Immune Deficiency States
3. Allergic Rhinitis
4. Allergic Reactions
5. Autoimmune Diseases

INPATIENT: 10%
OUTPATIENT: 90%
CONSULTATION: 60%
PRIMARY CARE: 40%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
RESIDENTS
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 200

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Research &amp; Consultation</td>
<td>Research</td>
<td>8:30 Grand Rounds 9:30 Pediatric Immunology Outpatient</td>
<td>Consultation &amp; Research</td>
<td>8 – 12 Immunology and Allergy Outpatient</td>
</tr>
<tr>
<td>PM</td>
<td>1:00 Pediatric Immunology Clinic or Adult Immunology/Allergy Outpatient</td>
<td>1:00 Immunology and Allergy Outpatient DMPG</td>
<td>Consultation &amp; Research</td>
<td>1:15-2:15 Combined CIA Rounds 2:15 – 5:00 Consultation/Library</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective is best suited to students with a true desire to learn about immune aspects of human illness. It requires active participation and motivation by the student in that they are not spoon-fed or simply put through a routine didactic experience. The elective is primarily directed towards students interested in academic internal medicine.
LEARNING OBJECTIVES (in order of importance)

1. Develop clinical competence and cost effective management in the ambulatory care of common, disabling allergic diseases; especially asthma, rhinitis, urticaria and angioedema for those interested in the primary care specialties.

2. Acquire the knowledge of the differential diagnosis of frequently seen allergic and immunologic disorders.

3. Review the pathophysiology of allergic diseases and the clinical correlation of fundamental immunology.

4. Develop familiarity with the pharmacology and treatment modalities utilized in this field: theophylline, corticosteroid, immunotherapy, etc.

5. Develop an understanding of the procedures used: rhinoscopy, nasal challenge, skin testing, etc.

6. Review the advances in clinical research in allergy.

7. Specifically, be comfortable with the recognition and management of anaphylaxis.

8. Familiarity with obtaining history and performing examinations as pertained to allergic and immunologic diseases.

DESCRIPTION: The purpose of this clerkship is to develop confidence and competence in the management of allergic diseases in an ambulatory care setting. This is to equip those interested in primary care to deal with frequently seen allergic diseases. There will be exposure to in-hospital allergy and immunology consultation as well.

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:30 - 11:30 Allergy/immunology clinic WVA</td>
<td>8:30 - 11:00 Primary care clinic</td>
<td>8:30 - 11:00 Allergy clinic WVA</td>
<td>8:30 - 11:30 Allergy/immunology clinic WVA</td>
<td>9:00 - 12:00 Allergy clinic Immunotherapy WVA</td>
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<td></td>
<td>Consultation &amp; referral clinic UCLA</td>
<td>Allergy Special Procedures WVA</td>
<td>Bronchial &amp; nasal challenge</td>
<td>12:00 Medical grand rounds WVA</td>
<td>12:00 Medical specialty conf. WVA</td>
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<tr>
<td></td>
<td>1:00 - 4:00</td>
<td></td>
<td>12:00 UCLA/WVA Basic &amp; clinical allergy/immunology conf.</td>
<td>1:30 - 2:30 Allergy immunology staff &amp; resident seminar WVA</td>
<td>3:00 - 4:00 Clinical consults reviewed WVA</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 Medical grand rounds WVA</td>
<td>Immunology Forum UCLA</td>
<td></td>
<td>12:00 Medical specialty conf. WVA</td>
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</table>

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will perform as consultants in the diagnosis and treatment of patients with allergic disease. Specific disease states will include allergic an non-allergic asthma, nasal and ocular allergy, nasal polyposis, and drug reactions. Although the clerkship is clinical, pharmacologic, immunologic and physiologic principles in allergic disease will be stressed. The students will participate in clinics, conferences, rounds and other teaching activities.
Advanced Clinical Clerkship

Location: HARBOR

1998-99

LEARNING OBJECTIVES (in order of importance)
1. Increase knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis and management of HIV-infection and its associated complications.
2. Develop a systematic diagnostic approach to the signs and symptoms in HIV-infected patients such as fever, cough, headache, or visual complaints.
3. Learn how to obtain a history from patients with common allergic diseases. Perform and interpret allergy skin testing and peak flow measurements.
4. Interpret & understand diagnostic lab tests for HIV & other immunodeficient states: HIV, ELISA, & western blot, quantitative immunoglobulins, T-lymphocyte subsets, & skin tests.
5. Develop understanding of the signs, symptoms, diagnosis & treatment of common opportunistic infections, i.e., PCP, Cryptococcal meningitis, Tuberculosis, CMV retinitis, & Toxoplasmosis.
6. Increase skills in ambulatory medicine by evaluating and treating patients with asthma and HIV infection at regularly scheduled clinic visits.
7. Recognize & treat a variety of dermatologic conditions seen commonly in HIV-infected patients.
8. Learn about side effects of & indications for a variety of antiretroviral and prophylactic (opportunistic infections) agents.

DESCRIPTION:
The Immunology/Allergy service at Harbor-UCLA Medical Center manages HIV-infected patients on a primary care outpatient basis and provides consultative assistance for hospitalized patients. The faculty members are well versed in the management of HIV-infection and its associated complications and are all very active in clinical research. Didactic sessions and journal clubs in HIV, immunology, allergy and infectious disease topics will be included in this elective. While performing consults on inpatients, students will be under the immediate supervision of the Clinical Immunology Fellow and the Consult Attending. They will be expected to present a new case at each attending round session and follow that patient while they are hospitalized.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Baseline evaluation of HIV patients
2. Pneumocystis carinii pneumonia
3. Cryptococcosis
4. Tuberculosis/Mycobacterium avium complex
5. Toxoplasmosis
6. Bacterial infections
7. Dermatologic conditions
8. Hematologic abnormalities

INPATIENT: 40%
OUTPATIENT: 60%
CONSULTATION: 30%
PRIMARY CARE: 70%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X OTHER Nurse Practitioner

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 35 - 50 (inpatient and outpatient)
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 250 - 350 (inpatient and outpatient)

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td><strong>AM</strong></td>
<td>9:00 - 11:00</td>
<td>8:30 - 10:00</td>
<td>8:00 - 9:00</td>
<td>8:30 - 12:00</td>
<td>8:00 - 10:00</td>
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<tr>
<td></td>
<td>Ward Consults</td>
<td>Medical Grand Rounds</td>
<td>Immunology Seminar</td>
<td>HIV Clinic</td>
<td>Ward Consults</td>
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<td>10:00 - 12:00</td>
<td>9:00 - 1:00</td>
<td></td>
<td>10:00 MKSAP review</td>
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<td></td>
<td></td>
<td>Ward Consults</td>
<td>HIV-Infectious Disease Clinic</td>
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<td></td>
<td></td>
<td>12:00 HIV lecture or Journal Club</td>
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<td><strong>PM</strong></td>
<td>12:00</td>
<td>1:30 - 4:00</td>
<td>1:00 - 5:00</td>
<td>12:00 - 1:00</td>
<td>12:00 - 1:00</td>
</tr>
<tr>
<td></td>
<td>Medical Lecture Series</td>
<td>Attending Rounds</td>
<td>Lunch - Allergy Immunology Case Conference</td>
<td>Morbidity &amp; Mortality Conference</td>
<td>ID Grand Rounds</td>
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<td>1:00 - 5:00</td>
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<td>3:00 - 5:00</td>
<td>1:30 - 4:00</td>
<td>1:00 - 3:00</td>
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<tr>
<td></td>
<td>HIV Clinic</td>
<td></td>
<td>Ward Consults</td>
<td>Attending Rounds</td>
<td>Ward Consults</td>
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<td>3:00 (optional) Immunology Review</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student would attend 3 outpatient clinic sessions and would be expected to see patients and then present to the clinic attending physician. Clinics are well organized with separate clinic charts which contain lab flowsheets, problem lists, and other pertinent information. Each patient is assigned to a nurse practitioner who is responsible for following up laboratory tests, etc., and ongoing case management.
LEARNING OBJECTIVES (in order of importance)

1. To familiarize the student with the clinical fundamentals of office-based allergy, asthma, and immunology.

2. To allow the student the opportunity to work side by side with physician, taking histories, having hands on experience with patients, and making decisions.

3. To develop new skills and techniques including:
   a) allergy skin testing
   b) pulmonary physiology testing and interpretation
   c) laboratory testing in the allergy/immunology field
   d) treatment, administration of injections, allergy therapy

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Asthma
2. Allergic Rhinitis
3. Urticaria
4. Insect sting allergy
5. Food sensitivity
6. Occupational allergy
7. Anaphylaxis
8. Angio - edema

INPATIENT:  %  
OUTPATIENT:  100%

CONSULTATION:  50%
PRIMARY CARE:  50%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  60
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  200

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>9:00 - 12:00 General Allergy consultations</td>
<td>9:00 - 12:00 General Allergy consultations</td>
<td>9:00 - 12:00 General Allergy consultations</td>
<td>9:00 - 12:00 General Allergy consultations</td>
<td>9:00 - 11:00 Case presentation/disc.</td>
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<td>11:00 - 12:00 Laboratory (Pulm. Func. testing interp.)</td>
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<tr>
<td>PM</td>
<td>12:00 - 1:00 Noon Allergy lecture 1:00 - 6:00 Allergy/Asthma evaluation and treatment 5:30 - 6:15 Case presentation/disc.</td>
<td>12:00 - 1:00 Noon Allergy lecture 1:00 - 5:00 Laboratory (Pulmonary Function testing interp.) (Skin testing)</td>
<td>12:00 - 1:00 Noon Allergy lecture 1:00 - 5:00 Allergy/Asthma evaluation and treatment</td>
<td>12:00 - 1:00 Noon Case conference presentation 1:00 - 5:30 Allergy/Asthma evaluation and treatment</td>
<td>1:00 - 5:00 Allergy/Asthma evaluation and treatment</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS & OTHER SPECIAL REQUIREMENTS: The elective is designed to provide a complete private practice experience. The experience will be intense and interesting.
LEARNING OBJECTIVES (in order of importance)
1. Illustrate the similarities and differences between TCM and modern Western Medicine, as well as their respective strengths and weaknesses in their approach to patient care
2. Show how integration of the two systems of medicine can be utilized to improve patient care
3. Have a basic understanding of the theory, diagnostic skills, treatment principles, and techniques used in TCM
4. Appreciate the progress of modern research on TCM and Integrative East-West Medicine
5. Learn 20 key acupuncture points as well as their application in the treatment of medical conditions commonly encountered in clinical practice
6. Master the properties and effects of 20 commonly used herbs and ten herbal formulas, as well as their application in the treatment of common medical problems
7. In-depth report or development of teaching cases on TCM or in Integrative East-West Medicine

DESCRIPTION: This two-week clinically-oriented course is designed for students who are interested in learning about traditional Chinese Medicine and in incorporating this system of Medicine into their practice and lifestyle. The focus will be on the modern concepts and applications of TCM as well as its practical synergistic integration with modern Western Medicine in clinical care. The case discussion format with demonstration and hands-on experience using patients and cases from the center clinic will be used throughout the course.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Fibromyalgia
2. Myofascial Pain Syndrome (head, back)
3. IBS
4. Chronic Fatigue Syndrome
5. Hypertension
6. Patients seeking consultation
7. Women’s Health Problems
8. Asthma

INPATIENT: 0%
OUTPATIENT: 100%
CONSULTATION: 80%
PRIMARY CARE: 20%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
RESIDENTS
INTERNS
X OTHER Staff acupuncturists & visiting professors

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 6 per 2 weeks
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40

TYPICAL WEEK SCHEDULE

<table>
<thead>
<tr>
<th>Week</th>
<th>Monday</th>
<th>Tuesday</th>
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<th>Thursday</th>
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<tbody>
<tr>
<td>Week 1</td>
<td>Lectures and Demonstration</td>
<td>Lectures and Demonstration</td>
<td>Lectures and Demonstration</td>
<td>Lectures and Demonstration</td>
<td>Lectures and Demonstration</td>
</tr>
<tr>
<td>Week 2</td>
<td>Clinic</td>
<td>Clinic</td>
<td>Clinic or self study</td>
<td>Clinic or self study</td>
<td>Student Presentations</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR: Bruce H. Brundage, M.D. (310)-222-2515

SUPPORTING FACULTY: Drs. French, Gincton, Detrano, Narahara, Shapiro, Criley, Goldberg, Laks, Oudiz, Budoff

STUDENT COORDINATOR: Victoria Arzola (310)-222-2517

REPORT TO: Consult Fellow, Main Bldg., 8E Rm 6, 8:30 AM.

PREREQUISITES: Medicine and 4th year standing

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 1,5,9,13,17,21,25,29,33,37,41,45,49.

LEARNING OBJECTIVES (in order of importance)
1. Improved evaluation of the cardiac patient, in terms of history taking, physical exam (especially auscultation ability).
2. Knowledge of the pathophysiology, natural history appropriate diagnostic workup, and therapeutic approach to valvular heart disease, ischemic heart disease, cardiomyopathies, and recurrent arrhythmias, both supraventricular and ventricular.
3. Knowledge of the pharmacology and clinical use of digoxin, beta-blockers, ace inhibitors, calcium blockers, antiarrhythmic drugs and antihypertensive agents.
5. Firm comprehension of EKG interpretation.
6. Basic understanding of echocardiograms, heart catheterizations and exercise testing.
7. Oral presentations.

DESCRIPTION: This course is designed to give the student a broad exposure to cardiology, while concentrating at the same time on individual patient evaluation and management.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Murmur--innocent vs. pathological
2. Rheumatic heart disease
3. Other acquired valvular heart dis.
4. Congestive heart failure
5. Cardiomyopathies
6. Pre-op evaluation of cardiac pt.
7. Arrhythmias
8. Ischemic heart disease

INPATIENT: 90%
OUTPATIENT: 10%
CONSULTATION: 100%
PRIMARY CARE: 0%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>9:00-9:30 EKG reading</td>
<td>7:30 - 8:30 EKG interpretation conf., Alternate and basic hemo-dynamics</td>
<td>9:00 -9:30 EKG reading</td>
<td>7:30 - 9:00 Basic EKG interpretation conf.</td>
<td>9:00 - 9:30 EKG reading</td>
</tr>
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<td>9:30-12:00 Consults</td>
<td>8:30 -10:00 Medicine grand rounds</td>
<td>9:30 - 12:00 Consults</td>
<td>9:00 -9:30 EKG reading</td>
<td>9:30 - 12:00 Consults</td>
</tr>
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<td>12:15 - 1:30 Non-invasive diagnosis conf.</td>
<td>10:00 -12:00 Consults</td>
<td>9:30 -12:00 Consults</td>
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<tr>
<td>PM</td>
<td>1:00 - 5:00 Consults</td>
<td>1:30 - 3:00 Rounds with the chief</td>
<td>2:00 - 4:00 Consultation Svc attending rounds</td>
<td>12:00 -1:00 Cardiology grand rounds</td>
<td>2:00 - 3:00 Consult rounds</td>
</tr>
<tr>
<td></td>
<td>2:30 - 4:30 Consultation Svc attending rounds</td>
<td>3:30 - 5:00 Cath conference</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No nights or weekends

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Harbor UCLA Medical Center 1000 W. Carson St. Torrance, CA 90509 Students should dress professionally: men should wear ties; white coats preferred.
Advanced Clinical Clerkship  Location: SFVMP  1998-99

COURSE CHAIR: Ming K. Heng, M.D.  PHONE #: (818)-895-9395

SUPPORTING FACULTY: Robin Waschsner & Sheila Meymandi

STUDENT COORDINATOR: Marianne Kimmerle  PHONE #: (818)-895-9394

REPORT TO: Marianne Kimmerle, Bldg.200, Room 3424, 8:30 am

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of 1) all aspects of coronary artery disease; 2) rheumatic heart disease; 3) heart failure due to various etiologies; and 4) cardiomyopathies.

2. The knowledge of the pharmacology of: digitalis, beta blockers, anti-arrhythmic and anti-anginal drugs.

3. Clinical skills: medical interviewing and physical examination (one of the strong points of the clerkship).


5. Interpretation of the electrocardiograms and pressure tracings.

6. Orientation on how to answer a consultation. Regular follow-up on these patients.

7. Diagnosis and management of complex in-patient problems on the consultation service.

8. Library research and interpretation of literature.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Coronary artery disease
2. Rheumatic heart disease
3. Arrhythmias
4. Congestive heart failure
5. Pulmonary heart disease
6. Cardiomyopathy
7. Drug toxicity
8. Preoperative eval. of patients w/ heart disease

INPATIENT: 30%
OUTPATIENT: 70%
CONSULTATION: 100%
PRIMARY CARE: 0%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 40-60
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 275-300

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
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<th>Tuesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 12:00 Cardiology Clinic, SVAMC, Bld. 200 Blue Pace</td>
<td>8:00 - 12:00 Cardiology Clinic, Clinic C @ OVMC</td>
<td>8:00 - 12:00 Cardiology Clinic 1, SVAMC, Bld 200, Blue Pace</td>
<td>8:00 - 3:00 Cardiology Consult Rounds, OVMC</td>
<td>8:30 - 12:00 RBG - Cardiology Clinic, SVAMC, Bld 200</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 - 2:30 SVAMC Procedures/Read EKG’s, Cardio Lab</td>
<td>1:30-5:00 Cardiology Consult Rounds, OVMC</td>
<td>1:30-3:00 Procedures/Read EKG’s, Cardio Lab, SVAMC</td>
<td>4:00-6:00 Cardiac Cath conference, SVAMC, BLD 200</td>
<td>1:30-4:00 Read Procedures, Cardio Lab, SVAMC</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Oral presentations of clinical cases. (This is very much stressed).
LEARNING OBJECTIVES (in order of importance)

1. To provide exposure to diagnostic assessment of cardiac patients, including evaluation of symptoms, physical signs, and role of noninvasive and invasive tests.

2. To develop skills in interpretation of electrocardiograms.

3. To understand indications for exercise stress testing, Holter monitoring, echocardiography, nuclear scans, and cardiac catheterization in work up of a cardiac patient.

4. To acquire skills in medical management of common cardiac conditions, such as congestive heart failure, angina, arrhythmias, and myocardial infarction.

5. To develop strategies in preoperative clearance for patients with cardiac disease.

6. To understand indications for surgery in patients with cardiac condition.

7. To understand indications for of surgery in patients with cardiac condition.

DESCRIPTION: This course is designed to expose the students to common inpatient and outpatient consultative questions in cardiology. Improved proficiency in interpretation of EKGs is expected on completion of the course. Basic understanding of the indications of various tests will be obtained.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Coronary artery disease
2. Cardiomyopathies
3. Congestive heart failure
4. Valvular heart disease
5. Cardiac arrhythmias
6. Pericardial disease
7. Evaluation of chest pain
8. Preoperative evaluation of cardiac patient

INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 100%
PRIMARY CARE: 0%
CLOSE CONTACT WITH: X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 30
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>12:00</td>
<td>Patient evaluation</td>
<td>Bedside teaching</td>
<td>Patient evaluation</td>
<td>Patient evaluation</td>
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<tr>
<td></td>
<td>Fellow core curriculum lecture</td>
<td>Attending Rounds 11:00am CORE curriculum* (students)</td>
<td>Attending Rounds</td>
<td>Attending rounds 11:00 CORE curriculum (student*)</td>
<td>Attending rounds 12:00 EKG Conference</td>
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<td></td>
<td>Patient evaluation</td>
<td>Noon conference</td>
<td>Patient evaluation</td>
<td>12:00 Journal Club</td>
<td>12:00 EKG Conference</td>
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<td></td>
<td>Attending Rounds</td>
<td>(Medical Service)</td>
<td>Attending Rounds</td>
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<tr>
<td>PM</td>
<td>Patient evaluation</td>
<td>12:00 Medical grand rounds</td>
<td>Patient evaluation</td>
<td>New patient</td>
<td></td>
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<tr>
<td></td>
<td>EKG Interpretation</td>
<td></td>
<td>EKG Interpretation</td>
<td>Cardiology clinic (required)</td>
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<td></td>
<td>3:00 Nuclear Cardiology Conference</td>
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<td>2:00 Nuclear Cardiology Conference</td>
<td>4:00 Med-Surgery Cath Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Daily interpretation of electrocardiograms with cardiology fellow is required so student can become comfortable with EKG interpretation by the end of the rotation. *Scheduled if more than 3 students on Cardiology CCU and consult rotation.
Advanced Clinical Clerkship  
Location: ST MARY  
1998-99

COURSE CHAIR:  
Drs. P. Barrett & A. Abbasi  
PHONE #:  (310)-491-9350

SUPPORTING FACULTY:  
Cardiology Attending Staff

STUDENT COORDINATOR:  
Sharon Richard  
PHONE #:  (310)-491-9350

REPORT TO:  
Department of Medical Education, 529 E. 10th St., Long Beach, CA 90813.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of various cardiac diseases.
2. Knowledge of the pharmacology of anti-arrhythmic and other cardioactive drugs.
3. Experience at physical exam with special reference to the cardiac exam.
4. Experience at interpreting diagnostic tests: EKG, treadmill, nuclear studies, echos.
5. Patient interviewing.

PREREQUISITES:  Medicine

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 1 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
1, 5, 9, 13, 21, 25, 29, 33, 37.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  
1. Coronary artery disease  
2. Congestive heart failure/cardiomyopathies  
3. Arrhythmias  
4. Valvular heart disease  
5. Pericarditis

INPATIENT:  90%  
OUTPATIENT:  10%  
CONSULTATION:  20%  
PRIMARY CARE:  80%  
CLOSE CONTACT WITH:  
X FULL TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  25

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td></td>
<td>Patient Care</td>
<td>Patient Care</td>
<td>Attending Rounds</td>
<td>Patient Care</td>
<td>Attending Rounds</td>
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<td>Attending Rounds</td>
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<tr>
<td></td>
<td>Cardiology Conf.</td>
<td>Noon Teaching Conf.</td>
<td>Teaching Conference</td>
<td>Teaching Conference</td>
<td>Grand Rounds</td>
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<td></td>
<td>EKG Conference</td>
<td>Patient Care</td>
<td>Patient Care</td>
<td>Patient Care</td>
<td>Patient Care</td>
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<td></td>
<td>Cath Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  No required night call; weekend responsibilities vary.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will be assigned non-critical patients in cardiology ward and consultative services, many of whom are housed in the telemetry unit. By arrangement a room within the critical hospital may be available for the entire month’s rotation. St. Mary Medical Center, 1050 Linden Avenue, Box 887, Long Beach, CA 90801
ME210.05 CARDIOLOGY

Advanced Clinical Clerkship  Location: KDMC  1998-99

COURSE CHAIR:  PHONE #:  
Vidya S. Kaushik, M.D. (310)-668-4564

SUPPORTING FACULTY:  
Drs. V. Bhasin, G. Marks, & C. Aranguri

STUDENT COORDINATOR:  PHONE #:  
Annie Coles (310)-668-4564

REPORT TO:  
Dr. Vidya Kaushik, MLK Rm 4N3 8:00 a.m.

PREREQUISITES:  Pediatrics and Medicine

AVAILABLE TO EXTERNS:  No

STUDENTS / PERIOD:  max 2 min 1

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  By Arrangement

DESCRIPTION:  Cardiovascular disease is the single largest cause of death in the country. A thorough understanding of pathophysiology and management is necessary for providing good patient care. This course is designed to provide in depth exposure to management of heart disease.

LEARNING OBJECTIVES (in order of importance)

1. Students will be able to accurately interpret 90% of EKGs performed at a Community Hospital.

2. Student will be able to define the indications and procedure for Stress testing and interpret the results.

3. Student will be able to assess the role of Echocardiography in diagnosis and management of heart disease.

4. Student will observe a minimum of five Swan-Ganz catheter insertions, two pacemaker insertions, and one coronary arteriography. He/she would be able to identify indications for each of them.

5. Student will acquire a concept of basic hemodynamics.

6. Student will be able to manage and consult on patients with common cardiac disorders.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  INPATIENT:  80%  CLOSE CONTACT WITH:  
1. Coronary heart disease  OUTPATIENT:  20%  X FULL TIME FACULTY
2. Hypertension  CONSULTATION:  80%  X CLINICAL FACULTY
3. Vascular heart disease  PRIMARY CARE:  20%  X FELLOWS
4. Pre-surgical evaluation for non-cardiac surgery in cardiac pts.  X RESIDENTS
5. Cardiomyopathy  X INTERNS
   X OTHER Nurses & Technicians

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  300

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00-9:00 Work Rounds</td>
<td>8:00-9:00 Work Rounds</td>
<td>8:00-9:00 Work Rounds</td>
<td>8:00-9:00 Work Rounds</td>
<td>8:00-9:00 Work Rounds</td>
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<td>9:00-11:00 CCU</td>
<td>9:00-11:00 CCU Rounds</td>
<td>9:00-11:00 CCU Rounds</td>
<td>9:00-11:00 CCU Rounds</td>
<td>9:00-11:00 CCU Rounds</td>
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<td>11:00-12:00 Stress Lab</td>
<td>11:00-12:00 Grand Rounds</td>
<td>11:00-12:00 Stress Lab</td>
<td>11:00-12:00 Stress Lab</td>
<td>11:00-12:00 Stress Lab</td>
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<tr>
<td>PM</td>
<td>12:00-1:00 Lecture</td>
<td>1:30-2:00 EKG Reading</td>
<td>12:00-1:00 Chief's round 1:30-2:00 EKG Reading 2:00-3:00 Consult Rounds 3:00-4:00 Consult Round/ECHO reading 4:00-5:00 Core Lecture</td>
<td>1:30-2:00 EKG Reading 2:00-3:00 Consult Rounds 3:00-4:00 Consult Round/ECHO reading 4:00-5:00 Core Lecture</td>
<td>12:00-1:00 Lecture</td>
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<td>1:30-2:00 Card. Clinic Consult Rounds</td>
<td>2:00-3:00 Card. Clinic Consult Rounds</td>
<td>1:30-2:00 EKG Reading 2:00-3:00 Consult Rounds 3:00-4:00 Consult Round/ECHO reading 4:00-5:00 Core Lecture</td>
<td>2:00-3:00 Consult Rounds 3:00-4:00 Cath conf. 4:00-5:00 Core Lecture</td>
<td>1:30-2:00 EKG Reading 2:00-3:00 Consult Rounds 3:00-4:00 Journal Club/Res. Conf. 4:00-5:00 Core Lecture</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Saturday CCU/Consultation Round 9:00-11:00 am. On call with CCU Resident/Intern every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  The emphasis in this clerkship is on one to one teaching of bedside cardiology. Students are encouraged to read their basic texts of cardiology before starting the clerkship.
Advanced Clinical Clerkship

Location: KAISER.SUN

1998-99

COURSE CHAIR: Michael B. Jorgenson, M.D. (213)-783-4516

SUPPORTING FACULTY: M. Jorgensen, M.D., Cardiology Division

STUDENT COORDINATOR: Beatriz Clark (213)-783-1432 or 4516

REPORT TO: Renea Watson, Academic Affairs Office, 4735 Sunset Blvd. West Mezzanine @ 8:30 a.m., then report to CCU, 4th Flr of Hospital.

LEARNING OBJECTIVES (in order of importance)
1. Obtain proficiency in the history and physical examination of the cardiovascular system.
2. Enhance knowledge base in: a) ischemic heart disease; b) hypertensive heart disease; c) valvular heart disease; d) cardiomyopathies; e) pericardial and congenital heart disease.
3. Appreciation of the application of advanced cardiac technology including ECHO, Nuclear, Stress Testing, and Cardiac Catheterization.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 0

DURATION: 2 - 8 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

DESCRIPTION: During this clerkship the student will develop a comprehensive approach to the cardiac patient. He/she will participate in the care of acute cardiac illness, and under direct supervision of staff cardiologists and fellows will cooperate in evolving a management plan. Emphasis will be placed on clinical management and an efficient use of tests and facilities. Students will spend 90% of their time in the CCU in a consultative capacity.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Chest pain
2. Angina
3. Coronary Artery Disease
4. Myocardial Infarction
5. Congestive Heart Failure
6. Cardiac Dysfunction
7. Cardiomyopathy
8. Valvular Heart Disease

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 25
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 200

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>8:00</td>
<td>See new patients</td>
<td>See new patients</td>
<td>See new patients</td>
<td>See new patients</td>
<td>Cardiology Conference</td>
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<td>9:00</td>
<td>Attending rounds</td>
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<td>AM</td>
<td>Work rounds/EKG</td>
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<tr>
<td>NOON</td>
<td>Cardiology Conference</td>
<td>Echo Clinic</td>
<td>Cardiology Conference</td>
<td>Patient Management Conference</td>
<td>Cardiology Surgical Conference</td>
</tr>
<tr>
<td>PM</td>
<td>Evaluate New and Old Patients</td>
<td>Internal Medicine 2PM Education Conference (Grand rounds 3 hrs.)</td>
<td>Treadmill Clinic</td>
<td>Evaluate old and new patients</td>
<td>Evaluate old and new patients</td>
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<tr>
<td>5:00</td>
<td>Sign out rounds</td>
<td>Sign out rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Saturday morning attending rounds

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship

Location: CS

1998-99

LEARNING OBJECTIVES (in order of importance)

1. Knowledge of certain disease processes or problems, such as:
   1) Valvular heart disease; 2) Coronary artery disease; 3) Cardiomyopathies; 4) Congenital heart disease; 5) Pericardial diseases.


3. Interpretation of test and special skills such as ECG, Echocardiograms, phonocardiograms, and chest x-rays.

4. Oral presentations.

5. Improved history and physical examination

6. Knowledge of drugs such as: 1) digoxin; 2) antiarrhythmics; 3) beta blockers; 4) antihypertensives.

7. Library research and interpretation of literature.

8. Medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).


DESCRIPTION: Each student, under the supervision of a resident or fellow, plays a primary role in the workup and management of patients with cardiovascular disease, from whom consultations are requested by ward teams. Exposure is also provided to outpatient cardiology through a weekly clinic. Students learn bedside examination and systematic diagnostic approaches to various diseases and are introduced to noninvasive techniques. Rounds are made daily with the cardiology fellow and with the attending physician. Students are expected to make use of the literature to support recommendation made to ward teams, and are encouraged to research and report on a topic of their choosing at some time during the rotation. Didactic lectures are given twice weekly by the cardiology fellow.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Rheumatic heart disease
2. Congenital Valvular heart disease
3. Management of pericardial effusions
4. Coronary artery disease
5. Congestive cardiomyopathies
6. Management of arrhythmias
7. Surgical clearance for pts. w/heart disease
8. Management of conduction system disease

INPATIENT: 75%
OUTPATIENT: 25%
CONSULTATION: 100%
PRIMARY CARE: 0%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10-15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 50

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>9:00 - 10:00 CCU conference</td>
<td>9:00 - 10:00 CCU conference</td>
<td>9:00 - 10:00 CCU conference</td>
<td>9:00 - 10:00 CCU conference</td>
<td>8:30 - 9:30 Medical grand rounds</td>
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<tr>
<td></td>
<td>10:00 - 12:00 Attending rounds</td>
<td>11:00 - 2:00 Cardiology conference</td>
<td>10:00 - 12:00 Attending rounds</td>
<td>10:00 - 12:00 Attending rounds</td>
<td>10:00 - 12:00 Attending rounds</td>
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</tr>
<tr>
<td>PM</td>
<td>12:00 - 1:30 ECG conference</td>
<td></td>
<td>12:00 - 1:30 ECG conference</td>
<td>12:00 - 1:30 ECG conference</td>
<td>12:00 - 1:30 ECG conference</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME215.01 OUTPATIENT DERMATOLOGY

Advanced Clinical Clerkship  
Location: CHS  
1998-99

COURSE CHAIR:  
Dr. Paul Levins  
PHONE #:  
(310)-825-0631  

LEARNING OBJECTIVES (in order of importance)  
1. To develop a working knowledge of the diagnosis and management of the most common diseases of the skin.
2. To develop proficiency in the performance of a skin biopsy.
3. To become familiar with minor surgical and diagnostic procedures pertaining to the skin.

SUPPORTING FACULTY:  
Drs. Cotliar, Modlin, Newcomer, Leibowitz

STUDENT COORDINATOR:  
Monica Stone  
PHONE #:  
(310)-825-5420

REPORT TO:  
200 Medical Plaza, Suite 450

PREREQUISITES: None

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2  min 0

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
1, 5, 9, 13, 17, 21, 29, 33, 37, 41, 45, 49

DESCRIPTION: Dermatology is a fully integrated program of UCLA and WLA VAMC. It runs multiple outpatient clinics offering students an outstanding opportunity for exposure to a large number of patients with skin diseases. Weekly Grand Rounds include a clinical & basic sciences lecture series & patient presentations. Conferences include weekly clinical slide and Text Review, a monthly Journal Club, Dermatopathology, and weekly inpatient teaching rounds. Dermatologic surgery, including Mohs Micrographic Surgery, is an integral part of the program. Students will be assigned to a resident for patient workup, will attend conferences and receive assigned readings. This is a “hands-on” elective. The student is assigned to a dermatologist mentor and will work up patients and present to a mentor for management.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Psoriasis
2. Acne
3. Basal & Squamous cell carcinoma
4. Actinic Keratoses
5. Benign skin tumors
6. Eczematous dermatitis
7. Superficial fungus infections
8. Warts

INPATIENT: 5%
OUTPATIENT: 95%
CONSULTATION: 5%
PRIMARY CARE: 95%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 1500

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>9:00 - 11:00 Introductory Lecture Slide</td>
<td>8:00 - 10:00 Grand rounds 10:00 - 11:00 Teaching rounds 11:00 - noon text review</td>
<td>8:00 - 12:30 Derm Surgery clinic</td>
<td>7:00 - 9:00 Inpatient rounds - W VA, 4NB</td>
<td>8:00 - 9:00 Clin. Slide Conf. W VA, Rm 5002</td>
</tr>
<tr>
<td></td>
<td>1:30 - 4:30 pm Dermatology clinic</td>
<td>1:00 - 4:00 pm Lecture/clinic</td>
<td>1:30 - 4:30 pm Derm clinic</td>
<td>1:30 - 4:30 Dermatology clinic</td>
<td>1:00 - 2:00 Peds Clinic (2nd Floor)</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 - 4:30 pm Histopathology Conf &amp; Cosmetic Clinic</td>
<td>1:30 - 4:30 Dermatology clinic</td>
<td></td>
<td></td>
<td>2:00 - 5:00 Dermatology clinic</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: RESEARCH ACTIVITIES: The Div. of Derm. is building a research program w/ the goal of understanding the role of immune responses in skin disease. Major interests include the role of T-cells and cytokines in infectious and neoplastic diseases of skin. Other interests include retinoid metabolism, cutaneous glutathione and phototoxicity, mechanisms of toxicity of dioxin. The Division operates a fully accredited training program leading to certification by the American Board. of
Advanced Clinical Clerkship  Location: SFVMP  1998-99

COURSE CHAIR:  PHONE #:
Madalene Heng, M.D.  (818)-895-9395

SUPPORTING FACULTY:
Howard Sofen, M.D.

STUDENT COORDINATOR:  PHONE #:
Marianne Kimmerle  (818)-895-9394

REPORT TO:
Bldg. 200, Room 3424, 8:30 a.m.

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

COURSE OBJECTIVES (in order of importance)
The major course objectives are:
1. Ability to take a dermatologic history.
2. Ability to examine a dermatology patient and describe different lesions.
3. Ability to form a list of differential diagnoses based on morphology and distribution of the lesions.
4. Knowledge of the common dermatological diseases including clinical course, prognosis, and management.
5. Practical approach to common diagnostic problems in dermatology.
6. Practical skills, including punch biopsies, diathermy and curettage, liquid nitrogens, and Wood’s lamp.
7. Introduction to dermatohistopathology and correlation of clinical signs with histopathological findings.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Actinic keratoses
2. Skin cancers, basal cell Ca., squamous cell Ca.
3. Acne vulgaris
4. Fungal infections
5. Seborrheic dermatitis
6. Warts
7. Psoriasis
8. Eczema (all types)

INPATIENT:  5%
OUTPATIENT:  95%
CONSULTATION:  %
PRIMARY CARE:  100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  100
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  650

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>8:00 - 12:00 Dermatology clinic SVA</td>
<td>8:15 - 10:00 UCLA grand rounds CHS</td>
<td>Independent study</td>
<td>8:30 - 12:00 SVA Surgical Clinic</td>
<td>8:00 - 9:30 Dermatology clinic @ OVMC</td>
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<tr>
<td></td>
<td></td>
<td>10:00 - 11:00 Clinical &amp; basic science conference CHS</td>
<td></td>
<td></td>
<td>10:00 - 12:00 OVMC Dermatology clinic (Specialty clinic B)</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 - 2:30 Histopathology @ SVA 3:30 - 5:00 Pathophysiology Conference (Mondays only)</td>
<td>1:00 - 5:00 Dermatology clinic @ SVA</td>
<td>Independent study</td>
<td></td>
<td>3:00 - 5:00 Wound Rounds Nursing Home</td>
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<td>4:30 - 5:00</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)

1. Familiarity with common skin diseases, including pathogenesis, distribution, course, and management.

2. Familiarity with topical medication frequently used in Dermatology.

3. Development of skill in taking a dermatological history and in performing a dermatological examination.

4. Learning dermatologic diagnostic skills such as KOH wet mounts, cutaneous biopsy techniques, dark field examinations, and interpretation of fungal cultures.

5. Contact dermatitis.

DESCRIPTION: The goal of this four-week elective is for the student to become more familiar with dermatologic diseases and their management by seeing a wide spectrum of skin disorders. Following an orientation period in which the student sees patients jointly with a dermatology physician, and eventually on his/her own.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Benign skin tumors
2. Malignant skin tumors
3. Viral/fungal/bacterial infections/Psoriasis
4. Seborrheic dermatitis
5. Contact dermatitis/exzematous dermatitis/neurodermatitis
6. Bullous disease
7. Acne and acne variants

INPATIENT: %
OUTPATIENT: 100%
CONSULTATION: 60%
PRIMARY CARE: 40%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 80
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 950

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td></td>
<td>8:00 - 10:00 am Grand Rounds</td>
<td>Surgery Clinic 8:00 - 12:00</td>
<td>8:30 - 12:00 Clinic</td>
<td>7:45 -8:45 am Clinical slide conf. Room 5002</td>
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<tr>
<td></td>
<td></td>
<td>10:00 - 11:30 am Lecture series</td>
<td>9:00 - 12:00 Outpatient Clinic</td>
<td></td>
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</tr>
<tr>
<td>PM</td>
<td>1:00 - 4:30 Outpatient clinic</td>
<td></td>
<td></td>
<td>1:00 - 4:30 Outpatient clinic</td>
<td>Outpatient clinic</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
**ME215.05 DERMATOLOGY**

**Advanced Clinical Clerkship**

**Location:** KDMC

**1998-99**

<table>
<thead>
<tr>
<th>COURSE CHAIR:</th>
<th>PHONE #:</th>
<th>LEARNING OBJECTIVES (in order of importance)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Paul Kelly, M.D.</td>
<td>(310)-668-4578</td>
<td>1. To provide an educational environment where students will be able to learn how to diagnose and treat the most common dermatoses.</td>
</tr>
<tr>
<td>SUPPORTING FACULTY:</td>
<td></td>
<td>2. For students to know and understand all the primary and secondary lesions.</td>
</tr>
<tr>
<td>Darlene Sampson, M.D., Vernon Wilson MD, Marcia Glenn</td>
<td></td>
<td>3. For students to become familiar with standard dermatologic diagnostic aids.</td>
</tr>
<tr>
<td>STUDENT COORDINATOR:</td>
<td>PHONE #:</td>
<td>4. For students to have a general knowledge of most dermatologic disorders.</td>
</tr>
<tr>
<td>Aban Kapadia</td>
<td>(310)-668-4578</td>
<td></td>
</tr>
</tbody>
</table>

**REPORT TO:**

MLK Hospital, Room #4016, 8:30 am.

**PREREQUISITES:**

**AVAILABLE TO EXTERNALS:** No

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

**DURATION:** 4 weeks

**1998-99 ELECTIVES BEGIN WEEKS:**

By Arrangement

**DESCRIPTION:** Students primarily work in clinics though they will round twice a week on inpatients-- patient population is 40% African-American and 45% Mexican-American and 15% other.

### STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 10%</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Acne</td>
<td>OUTPATIENT: 90%</td>
<td>X FULL TIME FACULTY</td>
</tr>
<tr>
<td>2. Warts</td>
<td></td>
<td>X CLINICAL FACULTY</td>
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<tr>
<td>3. Atopic Eczema</td>
<td>CONSULTATION: 15%</td>
<td>FELLOWS</td>
</tr>
<tr>
<td>4. Disorders of pigmentation</td>
<td>PRIMARY CARE: 85%</td>
<td>RESIDENTS</td>
</tr>
<tr>
<td>5. Alopecia</td>
<td></td>
<td>INTERNS</td>
</tr>
<tr>
<td>6. Viral Exanthems</td>
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<td>OTHER</td>
</tr>
<tr>
<td>7. Fungus infections</td>
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<tr>
<td>8. Collagen vascular diseases</td>
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</table>

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 100

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** 500

### TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Residents conf.</td>
<td>8:15 - 10:00 UCLA grand rounds</td>
<td>8:00 - 9:00 Conference</td>
<td>8:00 - 9:00 Residents Conference</td>
<td>8:00 - 9:00 Conference</td>
</tr>
<tr>
<td></td>
<td>9:00 - 12:00 Adult clinic</td>
<td>10:30 - 12:00 Pathology/Indianer</td>
<td>9:00 - 12:00 Adult clinic</td>
<td>9:30 - 12:00 Surgery clinic</td>
<td>9:00 - 12:00 Adult clinic</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 - 12:30 In-house rounds</td>
<td>1:30 - 4:30 Surgery clinic</td>
<td>1:30 - 4:30 Adult clinic and vitiligo clinic</td>
<td>1:00 - 2:00 Rounds 2:00 - 3:00 Residents conf. 2:00 - 3:30 Derm path - Dr. Chale Wadsworth VA</td>
<td>1:00 - 2:00 Residents conf. 3:30 - 4:00 Slide conference 4:00 - 5:30 Journal club</td>
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<tr>
<td></td>
<td>1:30 - 4:30 Pediatric clinic</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** None (1 resident takes calls via long-range beeper)

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**
ME215.06  DERMATOLOGIC SURGERY/DERMATOPATHOLOGY

Advanced Clinical Clerkship  Location:  CHS  1998-99

COURSE CHAIR:  PHONE #:
Gary P. Lask, M.D. (310)-825-6911

SUPPORTING FACULTY:
Drs. Behr, Bennett, Eremia, Hung, Ko, Lee, and Rosenzweig

STUDENT COORDINATOR:  PHONE #:
Monica Stone (310)-825-5420

REPORT TO:
200 Med Plaza, Suite 465

PREREQUISITES:  None

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 1 min 1

DURATION:  4-8 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49

LEARNING OBJECTIVES (in order of importance)
1. Diagnosis of skin cancer.
2. Instruction and approach to the management of cutaneous malignancies.
3. Proper instruction on tissue handling and movement for minor excisions. Included will be instrumentation. Opportunity to assist in minor surgeries.
4. Attend grand rounds/dermatologic surgery lectures.
5. Instruction on the management of small surgical defects by flaps, grafts, and granulation.
8. Approach to the diagnosis and management of benign skin conditions requiring surgery as a treatment.
9. Approach to the management of patient in pre-op and post-op status.
10. Approach to cosmetic dermatology and the topical care of skin to improve its health and appearance.

DESCRIPTION:
This course will serve as an introduction to the fundamentals of surgery of the cutaneous surfaces and dermatopathological differential diagnosis of common skin neoplasms and diseases. In addition, clinical aspects of aging and the applications of different cosmetic procedures and anti-aging techniques will be discussed. This is a flexible rotation tailored to the student’s needs so that the Mon./Fri. time can include rotations in general dermatology, private practice, or research laboratories.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Basal cell carcinoma
2. Squamous cell carcinoma
3. Melanoma
4. Management of surgical defects
5. Clinical aspects of wound healing
6. Skin tumor biology
7. Histopathology of skin diseases
8. Aging

INPATIENT:  5%
OUTPATIENT:  95%
CONSULTATION:  40%
PRIMARY CARE:  60%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  600

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>7:00 am - 12 noon Derm Surgery Clinic</td>
<td>7:00 - 8:00 am MOHS surgery</td>
<td>7:00 - 12:00 MOHS surgery/laser surg.</td>
<td>7:00 - 12:00 MOHS surgery/laser surg.</td>
<td>7:00 - 11:00 am Derm Surgery Clinic</td>
</tr>
<tr>
<td></td>
<td>8:00 - 10:00 am Grand rounds</td>
<td>10:00 - 12:00pm MOHS surgery</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>PM</td>
<td>1:30 - 5:00 pm Derm Surgery Clinic</td>
<td>1:00 - 5:00 MOHS surgery</td>
<td>1:00 - 5:00 pm (same as Thursday) + Laser surg.</td>
<td>1:00 - 5:00 MOHS surgery, general dermatology (consultation &amp; follow-up), cosmetic dermatology</td>
<td>1:00 - 5:00 Cosmetic Dermatology Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  *Other hours (Mon & Fri) will be arranged with Director.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Interest in clinical or laboratory research project required.
**ME215.07  THE OFFICE PRACTICE OF DERMATOLOGY**

<table>
<thead>
<tr>
<th>COURSE CHAIR:</th>
<th>Stuart L. Shear, M.D.</th>
<th>PHONE #: (213)-481-2982</th>
</tr>
</thead>
<tbody>
<tr>
<td>COURSE OBJECTIVES (in order of importance)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Common sense medical judgment in evaluating and diagnosing dermatology patients.</td>
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<tr>
<td>2. Familiarity with benign and malignant skin tumors and their diagnosis and treatment (i.e. basal cell, squamous cell, melanoma, epidermal cysts)</td>
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<tr>
<td>3. Familiarity with laboratory diagnostics (woods lamp, KoH, Tzank Smears)</td>
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<tr>
<td>4. Learning to take a dermatology history and its importance in diagnosis.</td>
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</table>

<table>
<thead>
<tr>
<th>AVAILABLE TO EXTERNS:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>PREREQUISITES:</td>
<td>None</td>
</tr>
<tr>
<td>STUDENTS / PERIOD:</td>
<td>max 1 min 1</td>
</tr>
<tr>
<td>DURATION:</td>
<td>2 weeks</td>
</tr>
</tbody>
</table>

**1998-99 ELECTIVES BEGIN WEEKS:**
1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, 45, 47, 49, 51

**DESCRIPTION:** The student will experience the office practice of dermatology and dermatopathology. He will assist in all procedures and office surgery and will actually perform certain procedures. She will read dermatopathology slides with Dr. Shear. He will present patients and learn concise descriptions of dermatologic lesions, give a differential diagnoses and become familiar with dermatologic therapeutics and laboratory diagnostics.

**STUDENT EXPERIENCES**

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 10%</th>
<th>OUTPATIENT: 90%</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acne</td>
<td></td>
<td></td>
<td>FULL TIME FACULTY</td>
</tr>
<tr>
<td>Rosacea</td>
<td></td>
<td></td>
<td>CLINICAL FACULTY</td>
</tr>
<tr>
<td>Seborrhea</td>
<td></td>
<td></td>
<td>FELLOWS</td>
</tr>
<tr>
<td>Viral Exanthem</td>
<td></td>
<td></td>
<td>RESIDENTS</td>
</tr>
<tr>
<td>Basal Cell</td>
<td></td>
<td></td>
<td>INTERNS</td>
</tr>
<tr>
<td>Squamous Cell</td>
<td></td>
<td></td>
<td>OTHER</td>
</tr>
<tr>
<td>Melanoma</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Epidermal Cysts</td>
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</tbody>
</table>

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 200/2 weeks

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** N/A

**TYPICAL WEEKLY SCHEDULE**

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>9:30 - 12:00 Office Hours</td>
<td>9:30 - 12:00 Office Hours</td>
<td>9:30 - 12:00 Office Hours</td>
<td>9:30 - 12:00 Office Hours</td>
<td>9:30 - 12:00 Office Hours</td>
</tr>
<tr>
<td></td>
<td>12:00 - 1:30 Hospital Consults</td>
<td>12:00 - 1:30 Hospital Consults</td>
<td>12:00 - 1:30 Hospital Consults</td>
<td>12:00 - 1:30 Hospital Consults</td>
<td>12:00 - 1:30 Hospital Consults</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 - 6:00 Office Hours</td>
<td>1:30 - 5:00 Office Hours</td>
<td>1:30 - 5:00 Office Hours</td>
<td>1:30 - 6:00 Office Hours</td>
<td>Dermatology Computer Information CDs</td>
</tr>
</tbody>
</table>

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** None

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**
1. Parking card to be obtained from security on 1st floor of Good Samaritan Hospital.
2. Meals are provided.

128
LEARNING OBJECTIVES (in order of importance)

1. Cognitive objectives include, but are not limited to understanding the disease process, diagnosing, and caring for the patient with MI, CHF, sepsis syndrome and multisystem organ failure, gastrointestinal bleed, acute renal failure, and critical OB emergencies.

2. At completion of this rotation, the student will be able to:
   a) Collect data and present a complicated critically ill patient by organ system and problem list in an organized manner.
   b) Examine a critically ill patient.
   c) Learn limitations and know when to ask for consultations.
   d) Learn the modes of mechanical ventilation, how and when to order and monitor each, including the use of ABG’s and noninvasive pulmonary monitors.
   e) Know how to insert a pulmonary artery catheter, how to interpret the parameters, and how to manage the patient depending upon results.
   f) Know the indication for and learn how to intubate.
   g) Coordinate care of a patient who is being seen by multiple services.
   h) Critically use the critical care literature.

DESCRIPTION:

The critical care rotation at Kern Medical Center is a multidisciplinary consultative service. We take active care of the inpatients in the MICU at night. We see a wide range of diseases as one would expect in a busy county hospital. The students will be under the immediate supervision of a resident from medicine, surgery, emergency medicine and/or transitional year. Although the residents take call every third night, the rotation can be made flexible so the students can alternate with the residents with whom they take calls. Should the student desire, he/she may stay on weekend call with the residents; however, this is not a requirement.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Acute MI
2. Sepsis syndrome
3. Exacerbation of COPD
4. Severe Pneumonia
5. Drug overdose
6. Gastrointestinal bleeds
7. Post-op trauma
8. Renal failure

INPATIENT: 100%
CONSULTATION: 50%
PRIMARY CARE: 50%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X RESIDENTS
X INTERNS
CLINICAL FACULTY
FELLOWS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12-15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40-60

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>7:00 - 9:30 See patients</td>
<td>7:00 - 9:30 See patients</td>
<td>7:30 - 8:30 4th Wed of month Critical Care lecture Same as Monday, Tuesday, &amp; Thursday</td>
<td>7:00 - 9:30 See patients</td>
<td>7:00 - 9:30 See patients</td>
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<td></td>
<td>7:30 - 8:15 Check-in rounds</td>
<td>7:30 - 8:15 Check-in rounds</td>
<td>9:30 - 12:00 Attending rounds 12:00 - 1:00 Noon lecture</td>
<td>7:30 - 8:15 Check-in rounds 9:30 - 12:00 Attending rounds 11:00 - 12:00 (Week 3) Master surgery rounds</td>
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<tr>
<td></td>
<td>9:30 - 12:00 Attending rounds 12:00 - 1:00 Noon lecture</td>
<td>12:00 - 1:00</td>
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<tr>
<td>PM</td>
<td>5:00 - 6:00 Check-out rounds 6:00 - 8:00 ICU Med cross coverage 10:00 - 8:00 ICU admits</td>
<td>5:00 - 6:00 Check-out rounds 6:00 - 8:00 ICU Med cross coverage 10:00 - 8:00 ICU admits</td>
<td>5:00 - 6:00 Check-out rounds 6:00 - 8:00 ICU Med cross coverage 10:00 - 8:00 ICU admits</td>
<td>1:30 - 2:30 (Week 1) Ventilator rounds 2:00 - 4:00 (Week 4) Master med clinician rounds Same as Monday, Tuesday &amp; Wednesday</td>
<td>2:00 - 3:00 (Week 3) Master surgery rounds II</td>
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<td>Same as Monday, Tuesday &amp; Wednesday</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every third night; students may have weekends off.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Learning modules are available to assist with reading during the rotation, and we now have computer assisted learning in place. Meals and lodging are provided.
Advanced Clinical Clerkship  

Location: CHS  

1998-99

LEARNING OBJECTIVES (in order of importance)
1. Ability to understand the disease process in patients by integration of clinical findings (history and physical) with laboratory tests.
2. Knowledge of the pathogenesis and pathophysiology of diseases of the pituitary, thyroid, parathyroid, adrenal, pancreas (endocrine), testes, and ovary.
3. An understanding of the function of the endocrine organs, metabolism of their hormones, and their effects on the body.
4. Ability to interpret the results of measurements of stimulation and suppression of the glands.
5. Familiarity with the use of insulin, thyroid hormones, corticosteroids, androgens, estrogens, vasopressin, and other agents.
6. Experience in interpretation of special procedures for visualisation, scans, ultrasonography for tumor and organ visualization.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Diabetes Mellitus
2. Graves’ disease
3. Thyroid nodules & thyroid cancer
4. Hypothyroidism
5. Hypocalcemia & Hypercalcemia
6. Adrenal disorders
7. Pituitary tumors
8. Hypogonadism and impotence
9. Hirsutism

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 300

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:30 - 12:00 am Endocrine clinic or Inpatient Work-ups</td>
<td>8:30 - 12:00 am Endocrine clinic or Inpatient Work-ups</td>
<td>8:30 -9:30 Medical grand rounds</td>
<td>8:30 - 12:00 am Endocrine clinic or Inpatient Work-ups</td>
<td>8:30 - 12:00 am Endocrine clinic or Inpatient Work-ups</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 - 4:00 pm In-patient attending rounds</td>
<td>Free time</td>
<td>12:00 - 1:00 pm Interdepartmental Endocrine conference, Attending Rounds</td>
<td>Thyroid biopsies</td>
<td>1:30 - 4:00 pm In-patient attending rounds, 4:00 - 5:00 pm Endocrine clinical conf.</td>
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Advanced Clinical Clerkship  Location:  CS  1998-99

COURSE CHAIR:  
Philip Barnett, M.D.  
PHONE #:  (310)-855-4774

SUPPORTING FACULTY:  
Drs. Braunstein, Bush, Adams, Melmed, Friedman, Bonert, Perfetti

STUDENT COORDINATOR:  
Judy Jacobs  
PHONE #:  (310)-855-4658

REPORT TO:  Judy Jacobs - Cardiology Conf. Room, Rm 5413, North Tower, 9:00 am.

PREREQUISITES:  Medicine

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 2  min 2

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of common pituitary-hypothalamic, thyroid, adrenal, parathyroid, and reproductive endocrine disorders, as well as knowledge of current issues in diabetes.
2. Knowledge of the pathophysiology of diabetes and thyroid, pituitary, adrenal, calcium, and reproductive endocrine disorders.
3. Ability to plan a comprehensive evaluation of an endocrine problem in a rapid, cost-efficient manner.
4. Ability to interpret thyroid, pituitary, adrenal, and gonadal suppression and stimulation tests, as well as imaging techniques and the ability to interpret blood sugars.
5. Knowledge of types, indications, contraindications, and adverse effects of various drugs, including thyroid hormones, glucocorticoids, androgens, estrogens, vitamin D, and insulin.
6. Ability to write an informative consultation note.
7. Ability to concisely present a patient verbally.
8. Ability to accurately palpate and describe thyroid glands.

DESCRIPTION:  Patients with medical, endocrine, or reproductive endocrine problems, as well as patients with diabetes, are seen by the Endocrine Service. There are two formal attending rounds, two student lectures and one patient conference per week. The students rotate inpatient consultations with the resident(s) on the service. Students will participate in the clinics and conferences. Clinics are varied and many are at sites other than Cedars.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Thyroid nodules  9. Amenorrhea
2. Hypothyroidism 10. Infertility
3. Hypercalcemia 11. Hyperparathyroidism
5. Hyponatremia 13. Lipid abnormalities
6. Pituitary tumors
7. Hypertension
8. Diabetes

INPATIENT:  20%
OUTPATIENT:  80%
CONSULTATION:  80%
PRIMARY CARE:  20%
CLOSE CONTACT WITH:
X  FULL TIME FACULTY
X  CLINICAL FACULTY
X  FELLOWS
X  RESIDENTS
X  INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  10-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  80

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:30 - 10:30 am Consultation and follow-up 10:30 - 12:00 Faculty attending rounds</td>
<td>8:00 - 9:00 am Endocrine Grand Rounds 9:00 - 12:00 Endocrine/Diabetes Clinic - (CS) ACC</td>
<td>8:00 - 9:00 am Endocrine/Diabetes Journal Club 9:00 - 12:00 Diabetes Outpatients Clinic (DOTEC)</td>
<td>8:00 - 9:00 am Diabetes lecture 9:00 - 12:00 Diabetes Outpatient Clinic (DOTEC)</td>
<td>8:30 - 9:30 am Medical Grand Rounds 9:30 – 11:00 Faculty Attending Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 - 1:00 Diabetes Seminar</td>
<td>Consultations &amp; follow-up Inservices 1:00-2:00pm</td>
<td>1:00 - 5:00 pm Harbor Endocrine Clinic 1:00 - 5:00 Diabetes Management Conf. Diabetes clinic - (CS) Insulin Rounds with Fellow</td>
<td>1:00 - 5:00 Diabetes Management Conf. Diabetes clinic - (CS) Insulin Rounds with Fellow</td>
<td>12:00 – 1:00 Endocrine Research Seminar</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Consults and Rounding on Inhouse patients.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will have the opportunity of working in the diabetes basic science laboratory in the afternoons.
Advanced Clinical Clerkship  Location: HARBOR  1998-99

LEARNING OBJECTIVES (in order of importance)
To become familiar with the following:
1. Pathogenesis and natural history, the orderly investigation, differential diagnosis and management of thyroid disease, diabetes mellitus, adrenal disorders, pituitary disorders, reproductive abnormalities, and parathyroid disorders
2. Medical interviewing and physical examination skills
4. Interpretation of endocrine tests: Thyroid function tests, glucose tolerance tests, hormonal measurements, stimulation and suppression tests
5. Appropriate format for writing consultations
6. Basic science foundations of pathophysiologic mechanisms underlying diseases of the thyroid, adrenal, pituitary, pancreas, gonads, parathyroid, and other metabolic disorders, including nutritional disorders
7. Diag. & mgmt. of complex in-patient problems such as diabetic ketoacidosis, thyrotoxicosis, thyroid nodules, goiter, hypothyroidism, obesity, Cushing’s disease, Addison’s disease, etc.
8. Oral presentation of clinical cases
9. Library research and interpretation of the literature
10. Outcome of health care, e.g., patient compliance & satisfaction

DESCRIPTION: Students function as subinterns on the in-patient Endocrine consult service and in the out-patient Endocrine & Diabetes clinics. They function as members of a team consisting of 1 pediatric resident, 2-3 medicine residents, the Endocrine Clinical Fellow, and the Endocrine Faculty Attending. Students also attend the Endocrine Division Conferences and Seminars and Attending Rounds.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Diabetes mellitus
2. Reproductive problems
3. Hypothyroidism & hyperthyroidism
4. Thyroid nodule & cancer
5. Hypocalcemia & Hypercalcemia
6. Hypoglycemia
7. Obesity, R/O Cushing’s disease
8. Pituitary tumors

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

CLOSE CONTACT WITH:
X FULL TIME FACULTY  X CLINICAL FACULTY  X FELLOWS  X RESIDENTS  X INTERNS  X OTHER Diabetes Nurse Educators

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20-25
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 200-250

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>9:00 Pituitary or thyroid nodule clinic</td>
<td>8:30 Medicine Grand Rounds</td>
<td>10:00 Review of thyroid biopsies</td>
<td>8:30 Diabetes &amp; Metabolism clinic</td>
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<td>10:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>2:00 Attending rounds</td>
<td>12:00 Basic Science seminar lecture series</td>
<td>12:00 Endocrine clinical conference 1:00 Endocrine clinic</td>
<td>2:00 Attending rounds</td>
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<td></td>
<td>2:00 Endocrine grand rounds 3:30 Attending rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective provides an outstanding opportunity for the student to see a broad spectrum of endocrine disorders. The student participates in an organized program of conferences, outpatient clinics, subspecialty consultations, and attending rounds, supervised at all times by a senior endocrine fellow. The student also has significant contact with the full-time faculty.
Advanced Clinical Clerkship

LOCATION: WVA

LEARNING OBJECTIVES (in order of importance)
1. Development of clinical skills for evaluation of out-patients with medical problems.
2. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of diabetes mellitus, hyperthyroidism, hypothyroidism, pituitary tumors, hypercalcemia, and impotence.
3. Knowledge of the pharmacology of insulin, thyroxine, cortisol, sulfonylurea, testosterone, estrogen.
4. Interpretation of tests, e.g., T4, FT4, T3, TSH, cortisol, LH, FSH, testosterone, estradiol, prolactin, scans.
5. Medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).
6. Oral presentations of clinical cases.
7. Library research and interpretation of literature.
8. Medical judgment, analysis of medical data, and synthesis of information.
9. Diagnosis and management of complex inpatient problems such as diabetic ketoacidosis, hyperglycemic non-ketotic coma, hypoglycemia, severe hyperthyroidism, hypercalcemia, and metabolic bone disease.
10. Accurate palpation of thyroid glands.

DESCRIPTION: The course emphasizes management of ambulatory patients. Students will evaluate in the Endocrine Clinic, the Diabetes Clinic, and the Lipid Clinic, and review each patient with an attending. Students will function as members of the team of housestaff on the inpatient endocrine consultation service. Students will learn about management of common endocrine problems through practical experience and clinical teaching.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Diabetes mellitus
2. Thyroid nodules
3. Hypothyroidism
4. Hyperthyroidism
5. Hypercalcemia
6. Hyperlipidemia
7. Metabolic bone disease
8. Pituitary disorders

INPATIENT: 30%
OUTPATIENT: 70%
CONSULTATION: 100%
PRIMARY CARE: 0%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 30
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 250

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Hospital rounds</td>
<td>Patient work ups</td>
<td>8:00 - 9:00 Practical diabetes conference</td>
<td>Lipid clinic 1st and 3rd Thursdays</td>
<td>8:00 - 9:00 Endocrine grand rounds</td>
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<td>9:00 - 12:00 noon Diabetes clinic</td>
<td>Gyn Endo clinic 2nd Thursday</td>
<td>9:00 - 12:00 Endocrine clinic</td>
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<td>1:30 Endocrine consult rounds</td>
<td>1:30 Endocrine consult rounds</td>
<td>12:00 - 1:00 Medical grand rounds</td>
<td>12:00 - 1:00 2nd Thursday Endocrine research conference</td>
<td>1:30 Endocrine consult rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Each student will evaluate 2-3 inpatient consults each week under the guidance of the Endocrine Fellow and will present and discuss the cases on inpatient attending rounds. In the clinics, students will evaluate patients independently and discuss each patient with an attending physician.
LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of diabetes and nutritional disorders, hyperthyroidism, hypothyroidism, hypercalcemia, and calcium homeostasis. The assessment of pituitary, adrenal, and reproductive functioning.

2. Interpretation of thyroid function tests, sex hormones, adrenal steroids, and pituitary hormone levels in disease.

3. Basic science foundation of pathophysiologic mechanisms in diabetes, hypertension, obesity, and other endocrine disorders.

4. Diagnosis and management of complex in-patient problems, especially the severe diabetic, malnutrition, and hyperalimentation.

5. Library research and interpretation of literature.

6. Oral presentations of clinical cases and scientific information in endocrine and nutritional disorders.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Diabetes
2. Thyroid disorders
3. Reprod. Endo & sexual dysfunction
4. Hypercalcemia and hypocalcemia
5. Pituitary & Adrenal assessments
6. Diagnostic & control problems in hypertension
7. Lipid disorders
8. Metabolic bone disease
9. Nutritional problems

INPATIENT: 40%
OUTPATIENT: 60%
CONSULTATION: 60%
PRIMARY CARE: 40%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 41
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 120

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 - 9:00 Diabetes &amp; Nutrition lecture 9:00 - noon Diabetes &amp; Endocrine clinic @ SVA</td>
<td>8:00 - 11:00 Consults 11:00 - noon Resident, Fellow and Staff discuss selected Endocrine and nutritional problems.</td>
<td>10:00 - 11:00 Review lecture in Endo and Nutrition @ SVA</td>
<td>8:00 - 9:00 Diabetes &amp; Nutrition lecture 9:00 - noon Diabetes &amp; Endocrine clinic @ SVA</td>
<td>9:00 - 11:00 Core curriculum Endocrine lectures</td>
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<tr>
<td>PM</td>
<td>1:00 - 2:00 Attending rounds 2:00 - 4:00 Consults 4:30 - 6:00 Foundation course UCLA</td>
<td>1:00 - 2:30 Endocrine consults w/Attending Journal Club 4:00 - 5:00 pm @ SVA</td>
<td>1:00 - 5:00 Endocrine Clinic @ OVMC</td>
<td>1:00 - 4:00 Attending consult rounds</td>
<td>1:00 - 3:00 Endocrine grand rounds 3:00 - 4:00 Endocrine Metabolic/Nutrition consult rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: It is handled by the Fellows/Residents and they decide amongst themselves per approval by the Chief of the Service.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This course will be held in part at the Olive View Medical Center.
### Advanced Clinical Clerkship

**Location:** CHS  
**1998-99**

**COURSE CHAIR:** David Heber, M.D., Ph.D.  
PHONE #: (310)-206-1987

**SUPPORTING FACULTY:**  
S. Inkeles, I. Yip, V.L.W. Go, E. Livingston, M. Maxwell

**STUDENT COORDINATOR:** Anita Stein  
PHONE #: (310)-206-1987

**REPORT TO:** Ctr for Human Nutrition, 900 Veteran Ave., Rm 12-211 @8:30 am.

**AVAILABLE TO EXTERNALS:** yes

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

**DURATION:** 2,4 weeks

**1998-99 ELECTIVES BEGIN WEEKS:** By Arrangement

**DESCRIPTION:** This course offers a combined approach to nutrition with a strong background in basic sciences and hands-on experience in nutrition support. Students will interview in-and out-patients and may observe surgical procedures performed for nutrition disorders, such as obesity.

**LEARNING OBJECTIVES (in order of importance)**
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis, and management of clinical nutrition problems in ambulatory and hospitalized patients.
2. Library research project in the area of the student’s interest in nutrition.
3. The basis of nutritional and metabolic abnormalities.
4. Interpretation of biochemical/hormonal indices of nutritional status.
5. Team approach and utilization of allied health personnel, e.g., dietary, exercise physiology, and psychology in nutrition.
6. The knowledge of clinical investigative methods and design of clinical trials.
8. Oral presentation of research and clinical material.
9. Use of parenteral and enteral nutrition in surgical patients.
10. Medical and surgical treatment of obesity.

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**
1. Obesity
2. Cardiovascular risk factor reductions
3. Hospital malnutrition
4. Preventative nutritional oncology
5. Gastrointestinal dysfunction
6. Cancer malnutrition
7. Renal failure
8. Eating disorders

**INPATIENT:** 50%  
**OUTPATIENT:** 50%  
**CONSULTATION:** 100%  
**PRIMARY CARE:** 0%

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

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** N/A

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** N/A

**TYPICAL WEEKLY SCHEDULE**

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<tbody>
<tr>
<td>AM</td>
<td>Independent study</td>
<td>Surgical nutrition clinic</td>
<td>Surgical procedures in nutritional disorders</td>
<td>8:00am Grand rounds in clinical nutrition General nutrition weight management clinic</td>
<td>Independent study</td>
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<tr>
<td>1:00 PM</td>
<td>Inpatient rounds</td>
<td>Independent study</td>
<td>Independent study</td>
<td>Multidisciplinary Nutrition research meeting</td>
<td>General nutrition weight management clinic</td>
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<tr>
<td>PM</td>
<td>Independent study</td>
<td>Independent study</td>
<td>Independent study</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:**

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** Preparation of clinical conference on nutrition and preparation of research protocol outline.
LEARNING OBJECTIVES (in order of importance)
1. To review and supplement the basic elements of nutrition that all doctors should know with specific reference to the type of practice activity the student is planning.
2. To develop skills in nutritional assessment and intervention.
3. To experience therapeutic diets.
4. To develop an understanding of the pathogenesis of nutritional disorders including obesity, malnutrition, and anorexia/bulimia.
5. To develop an understanding of the impact of nutrition on the development of chronic diseases and the progress of acute diseases.
6. To gain familiarity with popular diets and the appropriate use of vitamin and mineral supplements.
7. To develop skills in interacting with dietitians in a medical practice setting.
8. To develop an understanding of the use of enteral and parenteral nutrition in surgical patients.
9. To understand the indications and results of the medical and surgical treatment of obesity.

DESCRIPTION: This course offers a combined approach to nutrition with a strong background in basic sciences and hands-on experience in nutrition support. Students will interview in- and out-patients and may observe surgical procedures performed for nutrition disorders, such as obesity.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Obesity
2. Hospital malnutrition
3. Diabetes
4. Hyperlipidemia
5. Renal disease
6. Gastrointestinal diseases
7. Cancer malnutrition
8. Eating disorders

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 100%
PRIMARY CARE: 0%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Clinical Dietitians

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 35

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>General medicine nutrition</td>
<td>Surgical nutrition clinic</td>
<td>Surgical procedures in nutrition disorders</td>
<td>8:00am Grand rounds in clinical nutrition</td>
<td>Ambulatory nutrition clinic</td>
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<td>1:00 - 3:00 PM</td>
<td>Inpatient rounds</td>
<td>Hospital patient consults</td>
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<td>3:00-5:00</td>
<td>Nutrition rounds</td>
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<td>Nutrition research conference</td>
<td>Ambulatory nutrition clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: (Optional) Saturday A.M. Multidisciplinary weight management center

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Each student will be expected to conduct a clinical conference on a nutrition topic of their choice.
LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of diarrhea, inflammatory bowel disease, peptic ulcer disease, functional bowel disease, and liver disease.

2. Clinical skills: medical interviewing and physical examination

3. Medical decision making: analysis of medical data, and synthesis of information

4. Medical record keeping (e.g., data collection and recording appropriate format for writing consultations).

5. Diagnosis and management of complex inpatient problems and both common and tertiary outpatient problems.

6. Library research and interpretation of literature

7. Oral presentations of clinical cases

DESCRIPTION: Students will act as gastrointestinal consultants in outpatient departments and wards just as medical residents; however, with closer supervision by Fellows and attending physicians. About 3-4 patients a week will be assigned for complete evaluation and presentation on GI Rounds to a senior attending physician. Student will be expected to read extensively about cases assigned and participate in all other teaching activities of the Division of Gastroenterology. Two weeks will be spent on the inpatient consultative service and two weeks in outpatient gastroenterology and hepatology clinics.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Inflammatory Bowel Disease
2. Diarrhea
3. Peptic Ulcer Disease
4. Liver Disease—Acute and Chronic
5. Pancreatitis
6. Neoplasia, gastric, colonic, pancreatic
7. GI Bleeding
8. Dysphagia and Esophagitis

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 300

TYPICAL WEEKLY SCHEDULE - INPATIENT SERVICE

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<tr>
<td>AM</td>
<td>GI Clinic</td>
<td>Patient Consultation and/or GI Procedures</td>
<td>Medical Grand Rnds</td>
<td>Patient Consultation and/or GI Procedures</td>
<td>Basic Science Seminar (WVA)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Only the first year Fellows are on call with the Attending on second call. Residents and/or students are not on call.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will meet with a selected faculty member at least 2 times during the month for a discussion regarding techniques in gastrointestinal history taking and physical diagnosis. *Liver Biopsy and GI Pathology Conference not held during the summer. ** Held the third Thursday of the month except for July and August.
Advanced Clinical Clerkship  

**COURSE CHAIR:**  
Stephan R. Targan, M.D.  
(310)-855-6056  

**SUPPORTING FACULTY:**  
Drs. H. Lin and J. Vierling  

**STUDENT COORDINATOR:**  
Judy Jacobs  
(310)-855-4658  

**SITE:**  
CS  

**LEARNING OBJECTIVES (in order of importance):**  
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of GI, hepatic, and nutritional diseases or problems.  
2. Clinical skills: Medical interviewing, physical examination.  
4. Medical record keeping (e.g. data collection and recording in appropriate format for writing consultations).  
5. Oral presentations of clinical cases.  
7. Learn indicators for GI endoscopic procedures.  

**DESCRIPTION:**  
Students will perform GI consultations, make recommendations, and follow patients in the outpatient clinic and the hospital, supervised closely by medical residents, GI fellows, and voluntary full-time attending gastroenterologists. The students will participate in all of the teaching activities of the GI-Division.  

**COMMON PROBLEMS/DISEASES:**  
1. Inflammatory Bowel Disease  
2. Peptic Ulcer/Esophageal Disease  
3. Functional Bowel Disease  
4. GI Bleeding/Pancreatic Disease  
5. Jaundice/Hepatobiliary Disease  
6. Diarrhea/Abdominal Pain  
7. GI Malignancies  
8. Nutritional Problems/GI Motility  

**STUDENT EXPERIENCES**  
**INPATIENT:**  
75%  

**OUTPATIENT:**  
25%  

**CONSULTATION:**  
90%  

**PRIMARY CARE:**  
10%  

**CLOSE CONTACT WITH:**  
X FULL TIME FACULTY  
X CLINICAL FACULTY  
X Fellows  
X Residents  
X Interns  
X OTHER Metabolic Support Team  

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:**  
20  

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:**  
60  

**TYPICAL WEEKLY SCHEDULE**  

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| **AM** | 8:30 - 12:00 GI Outpt. Clinic | 8:30 - 10:30 GI FTF Rounds and Residents’ GI topic 10:30 - 12:00 Fellows mst rounds | *8:30 - 9:30 GI core lecture*  
*9:30 - 10:30 GI rounds 10:30 - 12:00 IBD Outpt. clinic* | 7:30 - 8:30 GI conference (Path, Radiol, Clinical)  
8:30 - 10:30 GI FTF rounds and residents’ GI Topics 10:30 - 12:00 GI Core lecture | 8:00 - 10:00 Fellows GI Core Curriculum (VA Wadsworth)  
8:30 - 9:30 Medical Grand Rounds 10:30 - 12:00 Residents MST Rounds |
| **PM** | 12:00 - 1:00 GI Fellows endoscopy  
1:00 - 5:00 HEP Outpt clinic (if not in continuity clinic)  
5:30 - 7:00 GI Grand rounds (2nd) (VA Wadsworth) | 12:30 - 1:30 GI Fellows endoscopy  
12:30 - 1:30 IBD Conf. 4:00 - 5:00 Hepatology Conf. | 12:00 - 1:00 GI Fellows endoscopy | 12:30 - 1:30 GI Med/Surg Conf. (1st)  
1:00 - 2:00 (1:30 - 2:30 LST) GI Voluntary Attending Rounds |

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:**  
None  

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**  
None
Advanced Clinical Clerkship: GASTROENTEROLOGY

Location: HARBOR

COURSE CHAIR: Viktor Eysselein, M.D.  PHONE #: (310)-222-2475

SUPPORTING FACULTY: Drs. Eric R. Lee, Sushil Ojha, Gloria Sze

STUDENT COORDINATOR: Diane Warpack  PHONE #: (310)-222-2475

REPORT TO: Harbor-UCLA Medical Center, N21 @ 8:30 am.

PREREQUISITES: Medicine

AVAILABLE TO EXTERN: yes

STUDENTS / PERIOD: max 3/mo

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance):
1. Knowledge of the pathogenesis and pathophysiology of common GI diseases.
2. Practical experience in the orderly evaluation and problem orientation of hospitalized patients referred for GI consultation, responding to the consultation request.
3. Knowledge of the principles of management of common GI problems with practical application of physiologic principles in a patient-oriented setting and active participation in follow-up care.
4. Familiarity with the histopathology and radiologic abnormalities of GI diseases.
5. Familiarity with GI endoscopic procedures (sigmoidoscopy, biopsy, gastroscopy, ERCP, colonoscopy, polypectomy), endoscopic findings, and the indications for endoscopy.
6. Experience with critical literature review in gastroenterology.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. GI bleeding
2. Alcoholic liver disease
3. Pancreatitis
4. Hepatitis
5. Peptic ulcer
6. Inflammatory bowel disease
7. Jaundice
8. GI malignancy

INPATIENT: 70%
OUTPATIENT: 30%
CONSULTATION: 80%
PRIMARY CARE: 20%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 16
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00-12:00 GI Clinic</td>
<td>8:30-10:00 Medical grand rounds</td>
<td>11:00 - 12:00 Medical (GI) - Surgical Ronds</td>
<td>8:30 - 9:15 Journal Club</td>
<td>9:00-11:00 Clinical &amp; research</td>
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<td>1:00 - 4:00 IBD Pancreas/biliary clinic</td>
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<td>PM</td>
<td>3:00 - 5:00 Consultation rounds</td>
<td>2:00 - 4:00 Consultations rounds</td>
<td>2:00 - 4:00 Clinical attending rounds</td>
<td>12:00 - 1:00 M &amp; M/conf.</td>
<td>2:00 - 4:00 Consultation rounds</td>
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<td>3:00 - 4:30 GI/Pathology/conf.</td>
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<td>2:00 -3:30 Consultative rounds</td>
<td>5:30-7:00 Integrated GI Conf. (2nd wk every month)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)

1. To familiarize the students with the most common gastrointestinal problems and diseases.
2. To acquire knowledge of the basic pathophysiology and epidemiology of the G.I. diseases.
3. To expand their scope of knowledge and intellectual skills to perform an adequate history and physical examination on those diseases.
4. To master basic clinical approach, differential diagnosis, working plan and management, writing a precise and clear consultation.
5. To learn the significance and timing of pertinent lab tests and values, interpretation of radiological procedures, and first line of treatment.
6. To stress prevention, prophylaxis, screening, and health promotion.
7. To expose students to newer and sophisticated equipment relative to clinical services and research studies.
8. Develop good progress notes and medical record keeping skills.

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>Housestaff Rounds&lt;br&gt;Previous day's/sight's problems&lt;br&gt;MEDICAL MORNING REPORT&lt;br&gt;Endoscopic Procedures&lt;br&gt;Consultation evaluations&lt;br&gt;Consultation Team Rds.&lt;br&gt;<strong>Medical Lecture</strong>&lt;br&gt;<strong>Journal Club</strong>&lt;br&gt;<strong>Endoscopy Conf. or Video Presentation</strong>&lt;br&gt;**G.I. Physiol.or Res. Endorsement of compl. cases; Collection Res. Data; Leftover Dictations&lt;br&gt;<strong>In-Service</strong>&lt;br&gt;Rancho Los Amigos Hosp. Conferences or General Medical Clinic&lt;br&gt;Endorsement of compl. cases; Collection research data; Leftover dictations</td>
<td>Housestaff Rounds&lt;br&gt;Previous day's/sight's problems&lt;br&gt;MEDICAL MORNING REPORT&lt;br&gt;Endoscopic Procedures&lt;br&gt;Consult Consult. Eval &amp;. Consult. Team Rds.&amp; Grand Rds.- Internal Med.&lt;br&gt;<strong>Medical Lecture</strong>&lt;br&gt;Fellow/Resident Topic Rev. <strong>G.I. Faculty Lecture</strong> <strong>G.I. Pathology Conf.</strong> **Case Discussion, Endorsement of compl. cases; Collect research data; Leftover dictations</td>
<td>Housestaff Rounds&lt;br&gt;Previous day's/sight's problems&lt;br&gt;MEDICAL MORNING REPORT&lt;br&gt;Endoscopic Procedures&lt;br&gt;Consultation Evaluations&lt;br&gt;Consultation Team Rounds&lt;br&gt;<strong>Medical Lecture</strong>&lt;br&gt;<strong>G.I. Radiology Conf.</strong></td>
<td>Housestaff Rounds&lt;br&gt;Previous day's/sight's problems&lt;br&gt;MEDICAL MORNING REPORT&lt;br&gt;Endoscopic Procedures&lt;br&gt;Consultation Evaluations&lt;br&gt;Consultation Team Rounds&lt;br&gt;<strong>Surgery &amp; G.I. Conf. Surgical Grand Rds. (optional)</strong></td>
<td><strong>Surgery &amp; G.I. Conf. Surgical Grand Rds. (optional)</strong>&lt;br&gt;Consultation Team Rds.</td>
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<td>PM</td>
<td>Medical Lecture&lt;br&gt;<strong>G.I. Physiol.or Res. Endorsement of compl. cases; Collection Res. Data; Leftover Dictations</strong></td>
<td>In-Service&lt;br&gt;Rancho Los Amigos Hosp. Conferences or General Medical Clinic&lt;br&gt;Endorsement of compl. cases; Collection research data; Leftover dictations</td>
<td>Medical Lecture&lt;br&gt;Fellow/Resident Topic Rev. <strong>G.I. Faculty Lecture</strong> <strong>G.I. Pathology Conf.</strong> **Case Discussion, Endorsement of compl. cases; Collect research data; Leftover dictations</td>
<td>Tumor Board&lt;br&gt;Gastroenterology&lt;br&gt;Ambulatory Clinic&lt;br&gt;Endorsement of compl. cases; Collection research data; Leftover dictations</td>
<td>Medical Lecture&lt;br&gt;Gastroenterology&lt;br&gt;Ambulatory Clinic&lt;br&gt;Endorsement of compl. cases; Collection Research Data; Leftover Dictations</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Not required.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Full time board certified G.I. Faculty are assigned to services on monthly basis. They supervise, guide, and teach students. Each student is required to review at least one broad topic & give a presentation during the rotation; also one journal club discussion. Students are encouraged to attend all lectures, particularly those given by the G.I. Faculty; also research activities of the division. Free meals provided during the rotation. **Every 2 weeks*** Once a month.
LEARNING OBJECTIVES (in order of importance)

1. In-depth knowledge of the commonly encountered gastrointestinal diseases: peptic ulcer disease, hepatitis, cirrhosis, pancreatitis, inflammatory bowel disease

2. Develop critical thinking skills using diagnostic and therapeutic decision-making activities

3. Improvement of the doctor-patient relationship using functional bowel disease as a model

4. Learning the indications, limitations, and complications of the various gastrointestinal procedures (endoscopy, liver biopsy)

5. Learning how to do library research and literature interpretation (vehicle: review of specific articles for journal club)

6. Knowledge of the use (indications, procedures, complications) of nutritional support materials

DESCRIPTION: The intent of this course is to provide the student with an overview of the clinical problems and decisions encountered by gastroenterologists in day to day practice.

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>GI clinic - Olive view</td>
<td>In-patient consultations endoscopy</td>
<td>GI clinic - SVA</td>
<td>In-patient consultations endoscopy</td>
<td>GI Basic science seminar (Wadsworth VA)</td>
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<td>In-patient rounds - OV</td>
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<td>GI Path conference - OV</td>
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<td>GI Journal Club</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student will be consulted in an attempt to tailor this experience as much as possible to his or her individual needs. The above description is what has been usually requested. Olive View Medical Center, 14445 Olive View Drive, Sylmar, CA 91342.
Advanced Clinical Clerkship

COURSE CHAIR: Phillip Koeffler, M.D.
PHONE #: (310)-855-4609

SUPPORTING FACULTY:
Stephen Lee, M.D. - Division of Hematology/Oncology

STUDENT COORDINATOR: Judy Jacobs
PHONE #: (310)-855-4658

REPORT TO: Judy Jacobs, Cardiology Conference Room, Room 5413, North Tower, 9:00 am.

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37.

DESCRIPTION:

LEARNING OBJECTIVES (in order of importance)
1. Diagnosis and management of oncologic and hematologic disorders, infection in the compromised host, the bleeding patient, psycho-social aspects of the cancer patient and family.
2. Understanding of the pathologic processes involved in anemias, thrombocytopenias, platelet dysfunctions, coagulopathies, myeloproliferative syndromes.
3. Diagnosis and treatment of hematologic malignancies.
4. Diagnosis and treatment of a variety of solid tumors.
5. Interpretation of peripheral blood smears, bone marrows, coagulation tests.
7. Learning how to make succinct and comprehensive oral presentations.
8. Improving the doctor/patient relationship.
9. Learning interpretation of the literature and principles of library research and analysis of medical data.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Myeloproliferative disorders
2. Infection in compromised host
3. Bleeding patient with coagulopathy
4. Hemolytic anemia
5. Non-Hodgkin's lymphoma
6. Breast cancer
7. Lung cancer
8. Acute leukemia
9. D.I.C.

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 100%
PRIMARY CARE: 0%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 Work rounds on wards 9:30 clinic</td>
<td>8:00 Work rounds 9:00 - 11:00 Combined Sepulveda Olive View Case conf. lecture 10:30 Chief's rounds 4-SW</td>
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<td>9:30 -Morph/clin path 10:30 Walk rounds 4-SW</td>
<td>10:00 Chief’s Rounds</td>
<td>10:00 Chief’s Rounds 11:00 Hospice Rounds</td>
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<td>11:00 Hospice Rounds 9:30 - 12:30 clinic</td>
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<td>PM</td>
<td>12:00 Noon conf.</td>
<td>12:00 Multi-disciplinary cancer conf.</td>
<td>12:00 Tumor board</td>
<td>12:00 Noon conf.</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship  

Location: CHS  

1998-99

COURSE CHAIR: 
Gary J. Schiller, M.D.  
PHONE #: (310)-825-5513

SUPPORTING FACULTY: 
Dr. Dennis Slamon and faculty

STUDENT COORDINATOR: 
Pamela Stephens  
PHONE #: (310)-206-5755

REPORT TO: 
Gary J. Schiller, M.D. 8:00 am 42-121 CHS.

PREREQUISITES: 
3rd year Medicine, Surgery

AVAILABLE TO EXTERNALS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance)

1. Knowledge of certain disease processes or problems: neoplastic disease, platelet disorders, hemoglobinopathies, anemia, leukemias & myeloproliferative disorders, depressed bone marrows due to drugs or chemotherapy.
3. Interpretation of tests: blood counts, microscopy–blood smears & bone marrows, radiographic studies & scans, coagulation studies, hemoglobin electrophoresis, enzyme studies.
4. Diagnosis & management of complex inpatient problems: DIC, anemia, thrombocytopenia, neoplastic diseases in various stages, treatment of all the preceding, psychological support, treatment of depressed bone marrows, & chronic pain.
5. Knowledge of drugs: chemotherapeutic agents, Fe, folate & B12, narcotics, transfusion.
7. Library research & interpretation of literature.
8. Oral presentation.
10. Utilization of health care team.
11. Medical record keeping.
12. Improving the doctor-patient relationship.

DESCRIPTION: The advanced Clinical Clerkship consists of general training in adult Hematology-Oncology at UCLA conducted in the setting of a consultative service. Course is constructed around selected patient workups referred to the division of Hematology-Oncology. Students will examine hospitalized patients with a variety of hematologic disorders. On some occasions they will also see outpatients.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Lymphomas
2. Leukemias
3. Anemias of chronic disease
4. Bleeding disorders, platelet disorders & DTC
5. Hemoglobinopathies
6. Multiple myeloma
7. Myeloproliferative disorders
8. Neoplastic Disease

INPATIENT: 60%

OUTPATIENT: 40%

CONSULTATION: 100%

PRIMARY CARE: 0%

CLOSE CONTACT WITH:

X FULL TIME FACULTY

X CLINICAL FACULTY

X FELLOWS

X RESIDENTS

X INTERNS

OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 62

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td></td>
<td>9:30 Oncology consult. rds.</td>
<td>Hem. consult. rds Myeloma Clinic</td>
<td>Onc. Consult. rds. Hem - Onc Grand Rds</td>
<td>12:00 Research Conference</td>
<td>12:00 Oncology Journal Club</td>
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<tr>
<td>PM</td>
<td>Clinical Research Conference</td>
<td>1:00 Leukemia Clinic</td>
<td>1:00 Fellows Clinical Conf.</td>
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<tr>
<td></td>
<td>Consults</td>
<td>Consults</td>
<td>Consults</td>
<td>Consults</td>
<td>Hem/Onc Clinic</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: There is no requirement that the student be available for night or weekend on-call responsibility

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: After an appropriate review of the literature, the patient and the disorder will be discussed with senior trainees and faculty. In addition, the students will participate in the major clinical conferences of the Division of Hematology-Oncology, and they will spend three hours each week in a supervised review of the peripheral blood and bone marrow morphology.
LEARNING OBJECTIVES (in order of importance)
1. Increase knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of the commonly seen hematologic disorders. These include anemia, thrombocytopenia and hemorrhagic disorders, elevated hematocrit, and leukemia and other hematologic malignancies.
2. Interpretation of tests such as CBC, red cell indices, differential cell counts, protime, PTT, bleeding time, etc.
3. Peripheral blood smear interpretation.
4. Improve medical decision-making: analysis of medical data and synthesis of information.
5. Medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).
6. Increase the student’s confidence and ability to give oral presentations.
7. Increase awareness of the basic science principles behind clinical disease.
8. Practical, cost effective assessment and management of common hematologic disorders.
9. Library research and interpretation of hematologic literature.

DESCRIPTION: The Hematology Service at Harbor-UCLA Medical Center is a consultative service for the entire hospital, except Pediatrics. A large variety of hematologic disorders are seen. Emphasis is placed on clinical evaluation of hematologic disorders. Various teaching aids such as slide sets and self-assessment examinations are available. While on the Hematology Service, students will be under the immediate supervision of the Clinical Hematology Fellow. Students will present cases at team rounds and Hematology Grand Rounds, participate in the Hematology Out-patient Clinic, and weekly Hematology Seminar.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Iron deficiency anemia
2. Thrombocytopenias
3. Sickle cell disorders & thalassemia
4. Anemia of chronic diseases
5. Acquired coagulopathy
6. Leukemias
7. Lymphomas
8. Elevated hematocrits

INPATIENT: 75%
OUTPATIENT: 25%
CONSULTATION: 75%
PRIMARY CARE: 25%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 120

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 10:00 Ward consults</td>
<td>8:30 - 9:30 Medical grand rounds</td>
<td>7:30 - 8:15 Heme seminar</td>
<td>Ward consults</td>
<td>8:00 - 12:00 noon Oncology clinic</td>
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<td></td>
<td>10:00 - 11:00 Heme discussion</td>
<td>10:00 - 12:00 Bone marrow clinic</td>
<td>8:15 - 12 noon Hematology clinic</td>
<td>Oncology clinic</td>
<td>12:00 - 1:00 Oncology Seminar</td>
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<td></td>
<td>11:00 - 12:00 Hematology slide session</td>
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<tr>
<td>PM</td>
<td>12:00 - 1:00 Medical Lecture series</td>
<td>Ward consults</td>
<td>1:00</td>
<td>12:00 - 1:00 Morbidity &amp; Mortality conference</td>
<td>1:00 - 4:00</td>
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<tr>
<td></td>
<td>2:00 - 4:00 Attending rounds</td>
<td>2:00 - 3:00 Oncology Conference</td>
<td>Ward consults</td>
<td>1:30 - 3:00 Hematology grand rounds</td>
<td>Ward consults</td>
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<tr>
<td></td>
<td>Ward consults</td>
<td>4:00 - 6:00 Attending rounds</td>
<td></td>
<td>3:00 - 5:00 Ward consults</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: There is no night duty.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: They are also expected to attend Medical Grand Rounds, the Internal Medicine Lecture Series, and Morbidity and Mortality Conference. Students are invited to participate in the activities of the Medical Oncology Service during their Hematology elective.
COURSE CHAIR: James R. Berenson, M.D.  
PHONE #: (310)-268-3622

SUPPORTING FACULTY:  
Drs. Alan Lichtenstein and Robert Vescio

STUDENT COORDINATOR: Sinae Chong  
PHONE #: (310)-268-3622

REPORT TO: Sinae Chong, Room 4237, W VA Medical Center,  
Bldg. 500, 9:00 am.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 2,4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 1,3,5,7,9,11,  
13,15,17,19,21,23,25,27,29,33,37,39,41,43,45,47,49,51

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history, the orderly investigation, diagnosis and management of lymphomas, leukemias, multiple myeloma, lung cancer, and various other solid tumors.
2. Medical decision making: analysis of medical data, and synthesis of information.
3. Introduction to the use of antineoplastic agents.
4. Introduction to differential diagnosis of hematological disorders.

DESCRIPTION: For 4 week course, list 2 consecutive time blocks.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Lung cancer
2. Malignant Lymphoma
3. Myeloma
4. Chronic Leukemia
5. Acute Leukemia
6. Sarcoma
7. Benign Hematologic Diseases
8. Miscellaneous solid tumors

INPATIENT: 75%
OUTPATIENT: 25%
CONSULTATION: 75%
PRIMARY CARE: 25%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:30 - 9:30  
Hematology-  
Oncology lecture at  
the CHS  
12:00 - 1:00  
Medical Service conf.  
1:00 - 5:00  
Hematology -  
Oncology clinic  | Independent study/ perform consultations  
1:00 - 3:00  
Consult service rounds  
4:00 - 5:00  
Tumor board | 10:00 - 12:00  
consult service ros  | Independent study/ perform consultations  
2:00 - 4:00 Consult service rounds | 10:30 - 12:00  
Morphology Review conference |
| PM   | 1:00 - 5:00  
Hematology -  
Oncology clinic  | 12:00 - 1:00  
Medical Grand rounds  
1:00 - 5:00  
Hematology -  
Oncology clinic  | 2:00 - 4:00 Consult service rounds | 12:00 - 1:00  
Medical Service conf.  
Independent study/ perform consultations |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The minimal course duration is 2 weeks; however, 4 weeks is recommended.
Advanced Clinical Clerkship  LOCATION: SVA  1998-99

COURSE CHAIR:  PHONE #:  Samuel Bernal, M.D., Ph.D.  (818)-895-9406

SUPPORTING FACULTY:  Nancy Feldman, Lauren Pinter-Brown

STUDENT COORDINATOR:  PHONE #:  Marianne Kimmerle  (818)-895-9394

REPORT TO:  Marianne Kimmerle, Bldg. 200, Room 3424, 8:30 am.

PREREQUISITES: Medicine, Surgery, OB-GYN, Pediatrics, & Psychiatry

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the natural history, clinical and diagnostic evaluation of common hematologic and neoplastic disorders, e.g., anemia, leukemia, ITP, breast cancer, colon cancer, lung cancer, prostate cancer, lymphomas
2. Knowledge of the etiology and pathogenesis of malignant transformation
3. Improved ability to evaluate peripheral blood smears and bone marrows
4. Improved history and physical examination
5. Medical judgment, analysis of medical data, and synthesis of information
6. Interpretation of biopsy materials, radiographic studies, and other staging procedures
7. Medical record keeping, e.g., data collection and recording, flow sheets, review of past records, appropriate format for outpatient records, and in-patient consultations.
8. Knowledge of commonly used chemotherapeutic agents and their toxicities.
9. Psychosocial problems and their management, including pain management and hospice care.
10. Techniques and procedures, e.g., performance of bone marrow aspirate and biopsy.
11. Diagnosis and management of common oncologic emergencies

DESCRIPTION: The student will participate on the Hematology/Oncology consult service at either OVMC or SVA. This will include the workup and evaluation of inpatients as well as extensive participation in the management of outpatients with cancer and blood disorders. Teaching sessions with attendings will occur in both settings, as well as through weekly conferences and lectures.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Lymphoma
2. Anemia
3. Leukemia
4. CA of the GI tract
5. CA of the lung
6. Myeloma
7. Breast CA
8. Polycythemia

INPATIENT: 30%
OUTPATIENT: 70%
CONSULTATION: 30%
PRIMARY CARE: 70%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Work rounds consultations</td>
<td>8:00 - 10:00 Conference and core lecture series</td>
<td>8:00 Oncology clinic @ OVMC</td>
<td>8:30 Grand rounds</td>
<td>8:30 Hematology clinic @ SVA</td>
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<td></td>
<td>10:00 Consult rounds</td>
<td></td>
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</tr>
<tr>
<td>PM</td>
<td>1:00 Hematology clinic @ OVMC</td>
<td>1:00 Oncology clinic @ SVA</td>
<td>Work rounds consultations</td>
<td>12:00 Journal Club (once a month)</td>
<td>Work rounds consultations</td>
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<td>3:30 Tumor board @ SVA (3rd Monday)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship  Location:  KAISER SUN  1998-99

COURSE CHAIR:  Pragnesh Patel, M.D.  PHONE #: (213)-783-4516

SUPPORTING FACULTY:
Micheal Glowalla, M.D., Jack Braunwald, M.D., Majorie Bernstein-Singer, M.D.

STUDENT COORDINATOR:  Beatriz Clark  PHONE #: (213)-783-1432 or 4516

REPORT TO:  Renea Watson, Aca. Affairs, 4733 Sunset Blvd, Mezzanine Level @ 8:30a.m. Then report to 6W in Hospital.

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 1  min 1

DURATION:  3-8 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1,5,9,13,17,21,25,29,33,37,41,45,49.

LEARNING OBJECTIVES (order of importance):
1. Diagnosis and management of common hematological problems, such as anemia, thrombocytopenia, and bleeding disorders.
2. Interpretation of the CBC, peripheral blood smears, bone marrow smears, and common coagulation tests.
3. To learn to perform bone marrow aspiration and biopsy and bleeding time.
4. Medical judgment, analysis of medical data, and synthesis of information.
5. Evaluation and management of common hematological malignancies.
7. Delivery of concise oral presentations.
8. To learn to write useful consultation notes.

DESCRIPTION:  The student performs inpatient and outpatient hematology consultations, supervised by Hematology fellow. Teaching activities include daily rounds with Resident, Fellow, and Attending Physician, and three outpatient clinics per week. Emphasis is on common problems in hematology.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Anemia
2. Thrombocytopenia
3. Coagulation disorders
4. Lymphoma
5. WBC disorders
6. Leukemia
7. Multiple myeloma
8. Anticoagulation therapy

INPATIENT:  70%  OUTPATIENT:  30%  CONSULTATION:  100%  PRIMARY CARE:  %

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  24
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  70

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>8:30-10:30 AM</td>
<td>Attending rounds Inpatient consultations</td>
<td>Attending rounds Inpatient consultations</td>
<td>Attending rounds Inpatient consultations</td>
<td>Attending rounds Inpatient consultations</td>
<td>Attending rounds Inpatient consultations</td>
</tr>
<tr>
<td>12:00 PM</td>
<td>Hematology Conference Coagulation clinic and lab</td>
<td>Medical grand rounds</td>
<td>Hematology Clinic</td>
<td>Inpatient consultations</td>
<td>Hematology Clinic</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Not expected to be available on holidays and weekends. On-call: none.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship

LOCATION: CHS

1998-99

COURSE CHAIR:
Gary J. Schiller, M.D.

PHONE #: 
(310)-825-5513

LEARNING OBJECTIVES (in order of importance)

1. Introduction to hematologic malignancies and bone marrow transplantation.
2. Instruction on the pathogenesis, natural history, orderly evaluation, differential diagnosis and management of leukemia and bone marrow failure.
3. Instruction on technique and interpretation of bone marrow aspirates and biopsies.

SUPPORTING FACULTY:
Dennis Slamon, M.D., Ph.D.

STUDENT COORDINATOR:
Pamela Stephens

PHONE #: 
(310)-206-5755

REPORT TO:
Gary Schiller, M.D. 42-121 CHS.

PREREQUISITES:
Medicine and Surgery

AVAILABLE TO EXTERNALS:
yes

STUDENTS / PERIOD:
max 2 min 1

DURATION:
4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
By Arrangement

DESCRIPTION:
This elective consists of a 4-week in-depth introduction to hematologic malignancies and bone marrow transplantation. Students participate as externs on the clinical service with adequate time for independent reading and participation in conferences in transplantation, hematology, oncology, and immunology. The degree of direct patient involvement will depend on the clinical sophistication of the student. This course is intended for MATURE students with considerable clinical background who wish for an intensive exposure to current research problems in oncology and bone marrow transplantation.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Leukemia
2. Aplastic Anemia
3. Cancer
4. Experimental Chemotherapy
5. Blood Product Transfusions
6. Infect. in immunosuppressed patients

INPATIENT: 70%
OUTPATIENT: 30%
CONSULTATION: 0%
PRIMARY CARE: 100%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Lab. Scientists, Immunologists

APPROMXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:
5 - 10

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

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:30 Bone Marrow Transplant Conference Room A2-342</td>
<td>8:30 Hematology Journal Club 9:30 X-Ray Rounds</td>
<td>Medical Grand Rounds</td>
<td>Operating Room Bone Marrow Harness Rounds</td>
<td>12:00 Oncology Journal Club</td>
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<td></td>
<td>10:00 Rounds - BMT</td>
<td>10:00 Rounds</td>
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<tr>
<td>1:00</td>
<td>Clinic - Factor Bldg.</td>
<td>Inpatient Care</td>
<td>1:00 LEUKEMIA CLINIC</td>
<td>Inpatient Care</td>
<td>Inpatient Care</td>
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<tr>
<td>PM</td>
<td>Inpatient Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:
Rounds daily

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of bacteremia, antibiotic sensitivity testing, opportunistic infection, Tuberculosis and Coccidiodomycosis.
2. Knowledge of Beta lactam antibiotics, aminoglycosides antibiotics, antifungal agents, broad spectrum antibiotics, and antiviral compounds.
3. Improve medical judgment, methods of data analysis, and synthesis of clinical information.
4. Improve skills in the diagnosis and treatment of complex inpatient medical problems.
5. Improve oral presentation of clinical problems.
6. Improve techniques of performing medical history and physical examination.
7. Exposure to clinical literature pertinent to case workups.
8. Improve clinical microscopic skills.
9. Knowledge of the risk benefit ratio of diagnostic and therapeutic procedures with an emphasis on doing the best job possible for the money spent.

DESCRIPTION: This course serves as a practical approach to diagnosis, work-up, and treatment of common and uncommon problems due to infection. Emphasis is placed on clinical observation, interpretation, and decision making.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Antibiotic usage
2. Fever
3. Bacteremia
4. Opportunistic infection
5. Tuberculosis
6. Coccidiodomycosis
7. Sexually transmitted disease
8. Neurological infection

INPATIENT: 95%  OUTPATIENT: 5%  CONSULTATION: 100%  PRIMARY CARE: %  CLOSE CONTACT WITH: X FULL TIME FACULTY  CLINICAL FACULTY  FELLOWS  RESIDENTS  INTERNS  OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10-20 patients
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 80-110 patients

TYPICAL WEEKLY SCHEDULE  DAILY ROUNDS

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS Contact student coordinator at (310) 825-7225 to ensure open elective & faculty contact. Individual faculty advisor arrangements may be made, but advance notification (3 months) is necessary. No students are scheduled without first contacting the coordinator above 2-3 months in advance to ensure faculty scheduling, interest, & accommodations. Students are welcome BUT MUST be coordinated individually with faculty.
LEARNING OBJECTIVES (in order of importance)
2. Medical judgment, analysis of medical data, and synthesis of information.
3. Diagnosis and management of complex in-patient problems, fever of unknown origin, systemic mycoses, surgical infections, prosthetic infections, septic shock.
4. Interpretation of Gram stains, cultures, and serologies; reading of x-rays and radionuclide scans.
5. Knowledge of pharmacology and use of penicillins, cephalosporins, aminoglycosides, antifungal and antituberculosis drugs.
6. Knowledge of vaccination and other immunoprophylaxis, chemoprophylaxis and prevention of infection.
7. Understanding pathogenesis of infection and host defense mechanisms and responses to infection.
8. Improved history and physical examinations.
9. Appropriate format for writing consultations.
10. Oral presentation of cases.

DESCRIPTION:

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Pneumonia
2. Urinary tract infections
3. Sepsis
4. Intraabdominal & wound infection
5. Fungal diseases
6. Endocarditis
7. Meningitis
8. Fever of unknown origin

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>9:30 - 10:30 Intake rounds</td>
<td>8:30 - 10:00 Medical grand rounds</td>
<td>8:30 - noon AIDS clinic</td>
<td>9:30 - 10:30 Intake rounds</td>
<td>8:30 - 9:30 Student/resident topic session</td>
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<td></td>
<td>10:00 - 11:00 Intake rounds</td>
<td>1:00 - 4:00 I.D. clinic</td>
<td>1:30 - 3:00 Teaching rounds</td>
<td>1:30 - 4:00 Teaching rounds</td>
<td>9:30 - 10:30 Intake rounds</td>
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<tr>
<td></td>
<td>Intake rounds</td>
<td>I.D. clinic</td>
<td>Teaching rounds</td>
<td>Teaching rounds</td>
<td>Intake rounds</td>
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<tr>
<td>PM</td>
<td>12:00 - 1:00 Medicine Lecture Series</td>
<td>1:00 - 4:00 I.D. clinic</td>
<td>1:30 - 3:00 Teaching rounds</td>
<td>1:30 - 4:00 Teaching rounds</td>
<td>12:00 - 1:00 I.D. grand rounds</td>
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<td>1:30 - 5:00 I.D. Teaching rounds</td>
<td>1:00 - 3:00 Teaching rounds</td>
<td>5:00 - 6:30 Mandell reading club</td>
<td>1:30 - 3:30 Combined rounds</td>
<td>1:30 - 3:30 (1st &amp; 3rd Friday) Adult ID rounds 1:30 - 2:30 Peds/ID combined conf.</td>
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<td>2:00 - 3:15 Chest I.D. Comb. conf.</td>
<td>5:00 - 6:30 Teaching rounds</td>
<td>5:00 - 6:30 Mandell reading club</td>
<td>5:00 - 6:30 Mandell reading club</td>
<td>5:00 - 6:30 Mandell reading club</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Service gives students higher than average responsibility for providing patient Consultative services.
ME245.03 INFECTIOUS DISEASES

Advanced Clinical Clerkship Location: KERN 1998-99

COURSE CHAIR: PHONE #:
Royce H. Johnson, M.D. (805)-326-2117

SUPPORTING FACULTY:
Drs. Perez, Munoz, Abraham, Caldwell

STUDENT COORDINATOR: PHONE #:
Debbie Pershadsingh (805)-326-2117

REPORT TO: Kern Med Ctr, Dept of Med, Room A303, 1830 Flower St, Bakersfield, CA 93305, 7:30 am, 1st day.

PREREQUISITES: Must have completed 3rd year

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 0

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance)
1. Learn to evaluate in detail through the mechanism of history and physicals specific infectious disease problems, both common and rare
2. Develop appropriate differential diagnosis
3. Develop and defend plan for diagnosis and treatment
4. Patient follow-up to assess outcomes
5. Demonstrate role of consultants
6. Learn use of library as applicable to patients seen

DESCRIPTION:
This elective rotation is designed to give the participant insight and experience in the recognition, diagnosis, evaluation, and therapeutic intervention of infectious diseases.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. G.U. Infection
2. Respiratory infectious
3. Post-operative infectious
4. Osteomyelitis
5. Tuberculosis
6. Coccidioidomycosis
7. Meningitis/CNS infection
8. Septic arthritis

INPATIENT: 75%
OUTPATIENT: 25%
CONSULTATION: 90%
PRIMARY CARE: 10%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Pharmacists, Respiratory therapists

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 30
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 80

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>7:30 Morning report</td>
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<td>8:00 Immunology Clinic</td>
<td>8:30 Coccidioidomycosis Clinic</td>
<td>10:00 Consult rounds</td>
<td>10:00 Consult rounds</td>
<td>10:00 Consult rounds</td>
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<td>PM</td>
<td>12:00 Medicine Conf.</td>
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<td>1:00 Micro rounds</td>
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<td>3:00 Teaching rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: IMPORTANT NOTE: Students must bring TB skin test or chest x-ray documentation & a rubella titre when they report for the rotation. Tests can be obtained in Student Health. TB tests are free and rubella titre is $7.00; student w/be reimbursed for this. Lodging is provided by the department at no cost to the student.
ME245.04  INFECTIOUS DISEASES

Advanced Clinical Clerkship

Location: OVH 1998-99

COURSE CHAIR:  PHONE #:
Glenn Mathisen, M.D.  (818) 364 3205

SUPPORTING FACULTY:
Glenn Mathisen, M.D., William Schwartzman, M.D.,
Sherree Poitier, M.D., Suzanne Donovan, M.D.

STUDENT COORDINATOR:  PHONE #:
Jessica Perry  (818)-364-3250

REPORT TO:  Jessica Perry/Starlett Alexander, Room 2B-182,
8:30 am.

PREREQUISITES:  Medicine

AVAILABLE TO EXTERNALS:  yes

STUDENTS / PERIOD:  max 3 min 1

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1,5,9,13,17,21,25,29,33,41,45,49.

LEARNING OBJECTIVES (in order of importance)
1. An understanding of the clinical presentation, laboratory evaluation, and management of common infectious disease problems such as fever, pneumonia, urinary tract infection, tuberculosis, AIDS, and hospital acquired infections.
2. Appropriate management of outpatient infectious disease problems, including outpatient management of HIV infection.
3. Knowledge of and appropriate use of antimicrobial agents.
4. Evaluation of tropical infectious disease problems such as malaria, typhoid fever, and parasitic diseases.
5. An understanding of public health measures for the control of infectious diseases as well as a knowledge of the basic epidemiology of hospital acquired infection.

DESCRIPTION:
This course is designed to provide a broad range of experience in evaluating and treating patients with fever and infectious diseases. The unique patient population at Olive View Medical Center and the variety of disease conditions seen provides a particularly stimulating environment for the clerkship. In addition to standard infectious disease problems, the student has the opportunity to see patients with more exotic, “tropical” infections (malaria, typhoid fever, brucellosis, parasitic infections) not commonly seen in the United States. Instruction in the outpatient and inpatient management of HIV infection is also emphasized. Olive View has one of the busiest AIDS clinics in the UCLA system. A busy conference tutorial schedule and the faculty commitment to teaching ensures that students will have ample opportunity to supplement their clinical experiences with an organized educational program.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Bacterial pneumonia
2. Sepsis
3. Tuberculosis
4. AIDS
5. Fungal disease
6. Parasitic disease
7. Hospital Acquired Infection

INPATIENT:  90%
OUTPATIENT:  10%
CONSULTATION:  90%
PRIMARY CARE:  10%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER: Nurse Epidemiologist

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  50-70

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>9:00 - 10:00 Journal Club &amp; ID Lecture</td>
<td>Combined UCLA ID Conference</td>
<td>See Consults</td>
<td>ID Clinic / OVMC</td>
<td>Intramural Case-Conference at O.V</td>
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<td></td>
<td>9:30 - 1:00 see Consults</td>
<td>See Consults</td>
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<td>See Consults</td>
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<tr>
<td>PM</td>
<td>1:30 - 5:00</td>
<td>ID Rounds with Attendings</td>
<td>ID Rounds with attendings</td>
<td>ID Rounds with attendings</td>
<td>ID Rounds with attendings</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  NONE

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Olive View Medical Center, 14445 Olive View Dr. 2B-182, Sylmar, CA 91342, (818) 364-3205.
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of bacteremia, central nervous system infection, pneumonia, urinary tract infection, intraabdominal infection, soft-tissue infection & of infection in immuno-deficient patients, particularly those with HIV infection.
2. Knowledge of the appropriate use of antibiotics.
3. Knowledge of the use of the microbiology laboratory, interpretation of serological tests, blood levels of antibiotics, and proficiency in interpretation of chest roentgenograms.
4. Knowledge in regard to an appropriate ‘infectious disease history and physical exam.’
5. Proficiency in med. judgment, analysis of clinical data & synthesis of info, in regards to diag. & therapy of infections.
6. Proficiency in diagnosis & management of bacteremia, fever of unknown origin, and central nervous system infection.
7. Knowledge of the use of radiological and radionuclide procedures (radionuclide scanning, computerized tomography, sonography and MRI) for diagnosis of infection.
8. Knowledge of the appropriate format for writing infectious disease consultations.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Pneumonia
2. Bacteremia/fungemia
3. Urinary tract infection
4. HIV infection
5. Osteomyelitis
6. Endocarditis
7. Intra-abdominal infection
8. Central nervous system infection

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Microbiology lab personnel

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12-25
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 80

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9-12: Work rounds with fellows and residents; evaluate new consults</td>
<td>9:00 - 10:30 Combined I.D. conference (WVA, OVMCSVA &amp; CS)</td>
<td>9:00 - 12:00 Work rounds &amp; new consults</td>
<td>9:00 - 12:00 Work rounds 11:00 - 12:00 Clinical lab teaching rounds</td>
<td>9:00 - 11:30 ID Clinic 12:00 - 1:00 Noon conf.</td>
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<td>12:00 - 1:00: Noon conference</td>
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<td>12:00 - 1:00 Medical grand rounds</td>
<td>12:00 - 1:00 Grand rounds (twice monthly)</td>
<td>1:30 - 3:30 Attending rounds</td>
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<tr>
<td>PM</td>
<td>1:30 - 3:30 Attending rounds with full-time faculty.</td>
<td>1:00 - 4:30 Immunodeficiency clinic</td>
<td>1:30 - 3:30 Attending rounds 4:00 - 5:00 ID/Pulmonary medicine combined conference (monthly)</td>
<td>1:30 - 3:30 Attending rounds</td>
<td>1:30 - 3:30 Attending rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: We encourage students who plan to do residencies in adult medicine (either Internal Medicine, Family Practice, Surgery, or Surgical subspecialties) to take our course. There is a strong emphasis on learning to manage most of the common (but sometimes difficult) types of infection that may be seen in clinical practice.
LEARNING OBJECTIVES (in order of importance)


2. Clear history-taking and physical examinations.

3. Knowledge of basic use of laboratory techniques in presumptive and definitive diagnosis stains, smears, cultures, and serologic tests.

4. Knowledge of up-to-date, non-invasive techniques for diagnosis-radiouclide, magnetic resonance and computer tomographic scans, and echosonography as related to infectious diseases; appropriate use of these procedures for drainage.

5. Knowledge of choice and use of antimicrobial agents, including appropriate use of serum level determinations.

6. Increased proficiency in collection, analysis, and presentation of data, especially in consultative format.

7. Knowledge of use and indication for dilution and synergy susceptibility testing.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Infections in HIV/AIDS
2. Bacteremia
3. Fever of uncertain origin
4. Pneumonia
5. Soft tissue infection
6. Central nervous system infection
7. Infection in compromised host

INPATIENT: 85%  
OUTPATIENT: 15%  
CONSULTATION: 100%  
PRIMARY CARE: 0%  
CLOSE CONTACT WITH:
X FULL TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER Microbiologist in clinical microbiology

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12  
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:30 Work rounds with fellows and evaluation of new consults  
11:00 Microbiology lab, rounds | 9:00 UCLA combined clin. conf. Wadsworth, Sepulveda or CSMC  
11:00 Microbiology lab, rounds | 9:00 I.D. clinic | 8:30 Work rounds with fellows and evaluations of new consults  
11:00 Microbiology lab, rounds | 8:30 Med. Grand Rounds  
11:00 Microbiology lab, rounds |
| PM   | 1:00 - 5:00 Attending I.D. rounds | 1:15 Core lecture  
2:15 Work rounds | 12:00 Med. I.D. Grand Rounds (monthly)  
1:00 - 5:00 Attending I.D. rounds | 1:15 Core lecture  
3:00 Med./Peds. I.D. conference | 1:00 - 5:00 Attending I.D. rounds |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Clinical research - programs include evaluation of new antimicrobial agents (antifungals, anti-pneumocystis, anti-HIV), clinical reviews of specific diseases.  
LEARNING OBJECTIVES (in order of importance)

1. Diagnosis and management of diverse infectious disease problems, e.g.,
   - Endocarditis (native and prosthetic valve)
   - Meningitis
   - Sepsis syndromes (Gram pos. & gram neg.)
   - Community and nosocomially acquired pneumonia

2. Evaluation of unexplained fever.

3. Infections of the compromised host:
   - Bone marrow and organ transplants
   - Leukemia/Lymphoma
   - Fever and neutropenia syndrome


5. Antibiotic and antiviral chemotherapy regimens:
   - Current usage patterns

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. "Classical" infectious diseases
2. Pneumonia, sepsis, etc.
3. Granulomatous infection, TB, and fungus
4. Infections related to prosthetic devices; endocardial; intravenous access; orthopedic appliances.
5. AIDS
6. 

INPATIENT: 98%
OUTPATIENT: 2%
CONSULTATION: 100%
PRIMARY CARE: %
CLOSE CONTACT WITH:
- FULL TIME FACULTY
- CLINICAL FACULTY
- RESIDENTS
- INTERNS
- OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60-80

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00-9:00 Morning report</td>
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<td>9:00-12:00 Workup new consults and review prior patients</td>
<td>Workup new consults and review prior patients</td>
<td>Workup new consults and review prior patients</td>
<td>Workup new consults and review prior patients</td>
<td>Workup new consults and review prior patients</td>
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<tr>
<td>PM</td>
<td>1:30-5:00 Rounds with ID attending</td>
<td>Internal Medicine Education Conference/ ID rounds</td>
<td>Rounds with ID attending</td>
<td>12:00-1:30 ID Conference 1 per month</td>
<td>Rounds with ID attending</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Weekends off

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The workup of an infectious disease problem sharpens clinical skills in that it involves rigorous examination of the patients' complete medical condition. The question most commonly asked of us is: "What antibiotic should I use?"—but the question that we ask ourselves is: "What is the disease?"
LEARNING OBJECTIVES (in order of importance)
1. Teach/expose students to fundamental principles of General Internal Medicine and medical aspects of surgical diseases.
2. General Medical consultation on all surgical services, including preoperative medical evaluation of risk factors and clearing or denying major surgical interventions.
3. Management of post operative complications - surgical patients with previous myocardial infarction, arrhythmia, hypertension, diabetes, COPD, CHF, etc.
4. Prevention of postoperative complications, including measures to prevent deep vein thrombosis (DVT), pulmonary embolism (PE), and postoperative infections.
5. Ambulatory care clinic for General Medical care, including emphasis on the value of screening, early detection, and prevention of certain medical diseases, including cancer. Geriatric medicine is also emphasized.
6. Didactic teaching of General Internal Medicine through regular weekly conferences and daily bedside medical rounds.
7. Regular weekly rounds to learn about radiologic aspects of common medico-surgical diseases in the corresponding supporting divisions: x-ray, ultrasound, nuclear scan, etc.
8. Teach/exposure to medical indications/contraindications & complications of general & spinal anesthesia.

DESCRIPTION: This course emphasizes the management of the complex medical problems of all hospital in-patients who are not on medical wards. The pre-operative assessment of medical risks and complications is also stressed.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Cardiac diseases
2. Peripheral Vascular diseases
3. Hypertension
4. Postoperative wound infections
5. Postoperative pneumonia
6. GI and Bronchogenic carcinoma
7. Drug toxicities and interactions
8. Complications of diabetes mellitus

INPATIENT: 70%
OUTPATIENT: 30%
CONSULTATION: 80%
PRIMARY CARE: 20%

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 8-10
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 30-50

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:30 Morning report</td>
<td>8:30 Grand rounds</td>
<td>7:30 Morning report</td>
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<td>8:30 Clinical conf.</td>
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<td>9:30 Consult core</td>
<td>10:00 X-Ray rounds</td>
<td>9:30 Consult core</td>
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<td>curriculum</td>
<td>10:30 Perioperative rounds</td>
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<td>10:00 Perioperative rds</td>
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<td>10:00 Perioperative rounds</td>
<td>10:00 Dr. Tabbarah rounds</td>
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<tr>
<td>PM</td>
<td>12:00 Internal Medicine lecture</td>
<td>12:00 EKG Conference</td>
<td>12:00 Endocrine conference</td>
<td>12:00 Medical M &amp; M</td>
<td>12:00 Infectious disease</td>
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<td>1:00 Preoperative</td>
<td>1:30 Dr. Tabbarah rounds</td>
<td>3:00 Attending rounds</td>
<td>1:30 High risk OB clinic</td>
<td>1:30 Ambulatory care</td>
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<td>clinic PCDC</td>
<td>rounds</td>
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<td>grand rounds PCDC</td>
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<td>3:30 Perioperative</td>
<td>3:30 Perioperative</td>
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<td>3:30 Attending rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Achieve proficiency in: obtaining history, physical exam, data collection, case presentation, basic diagnostic tests, therapeutic procedures.
2. Experience in writing orders & understanding problem oriented progress notes.
3. Establish priorities in diagnostic tests; interpretation of lab data; cost-effective patient evaluation.
4. Develop clinical judgment & decision-making skills.
5. Ascertain patient’s goals understanding & compliance with meds and/or lifestyle changes.
6. Understand the basic concept & dilemmas in medical ethics.
7. Role of computers in medicine & their use in education, practice management, QA.

DESCRIPTION: This elective rotation is designed to give the participant insight and experience in the recognition, diagnosis, evaluation and therapeutic intervention of diseases characteristic of the practice of internal medicine.

COMMON PROBLEMS/DISEASES
1. Hypertension
2. Ischemic heart disease
3. Congestive heart failure
4. COPD
5. Hepatic cirrhosis
6. Pneumonia
7. Pancreatitis
8. Gastrointestinal bleeding

INPATIENT: 70%
OUTPATIENT: 30%
CONSULTATION: 10%
PRIMARY CARE: 90%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Pharmacists, Nurses, Respiratory Therapists, and Dieticians

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 36-40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: N/A

TYPICAL WEEKLY SCHEDULE

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<td>8:30 Work rounds</td>
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<td>PM</td>
<td>12:00 Conference</td>
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<td></td>
<td>1:30 Preceptor rounds</td>
<td>1:30 Dis. of Major diseases</td>
<td>1:30 Ambulatory care center</td>
<td>1:30 Dis. of major diseases</td>
<td>1:30 Preceptor rounds</td>
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<td>5:00 Checkout</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On-call every eighth night: Saturday am check-in.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: IMPORTANT NOTE: Students must bring documentation of having a TB skin test or chest x-ray and a rubella titre when they report for the rotation. Tests can be obtained in Student Health. TB tests are free and rubella titre is $7.00 which will be reimbursed to the student. Lodging is provided by the department at no cost to the student.
COURSE CHAIR: Author Gomez, M.D.  
PHONE #: (818) 891-7711 x5129

LEARNING OBJECTIVES (in order of importance)
1. Enhancement of physical diagnosis skills with emphasis on the musculoskeletal, neurologic, and cardiac exam. Additional areas of emphasis may include: ocular and dermatologic manifestations of systemic disease, ENT exam, rheumatologic physical findings, examination of the patient with abdominal pain, and the pulmonary exam.
2. Enhancement of skills in patient interview techniques. Specific skill building in obtaining a medical history establishing rapport with the patient, understanding and interpreting patient needs, and expansion of your medical interview to incorporate the bio-psycho-social model of disease.
3. Enhancement of such fundamental clinical skills as reading a chest x-ray or interpreting a gramstain.
4. Integration of these clinical skills through patient case studies.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Cardiac exam
2. Musculoskeletal exam
3. Neurologic exam
4. Clinical history taking/patient interview skills
5. Eval. of patients w/ acute abdominal pain.

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tr>
<td>AM</td>
<td>9:30 - 12:00 noon</td>
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<tr>
<td></td>
<td>Cardiac Exam</td>
<td>CXR Clinical application</td>
<td>Neurology exam</td>
<td>Eye exam</td>
<td>Physical diagnosis rounds - OV Wards</td>
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<td>PM</td>
<td>1:00 - 4:30pm</td>
<td>1:00 - 4:30pm</td>
<td>1:00 - 4:30pm</td>
<td>1:00 - 4:30pm</td>
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</tr>
<tr>
<td></td>
<td>Musculoskeletal PE of the back</td>
<td>Skin exam Physical diagnosis rounds, OV Wards</td>
<td>Overview - History taking skills</td>
<td>Musculoskeletal exam</td>
<td>Pulmonary cases</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship  
Location: CHS  
1998-99

COURSE CHAIR:  
Christopher B. Cooper, M.D.  
(310)-825-5988

SUPPORTING FACULTY:  
Various Internal Medicine Staff

STUDENT COORDINATOR:  
Anita Saenz  
(310)-825-5988

REPORT TO:  
Dr. Christopher B. Cooper  
37-131 CHS (Pulmonary Div. Office)

LEARNING OBJECTIVES (in order of importance)
1. Review each organ system for common and significant signs.  
2. Provide in-depth illustration of diagnostic signs.  
3. Cover all major organ systems in patients.  
4. See, feel, and hear important physical signs which students may not have previously experienced and may have uncertainties about.

PREREQUISITES:  
Medicine and Surgery

AVAILABLE TO EXTERNS:  
no

STUDENTS / PERIOD:  
max 24 min 6

DURATION:  
2 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
25

DESCRIPTION:  
The objective of this course is to refine the skills of clinical diagnosis by showing students unequivocal physical signs. Didactic sessions will be followed with projected clinical slides, radiographs, scans, and laboratory data as they apply to each particular organ system. Each afternoon the group will be shown abnormal signs, at the bedside, in 6-8 patients with stable diseases of that organ system. The students will then be asked to demonstrate these signs to the satisfaction of the instructor. As clinicians, we assimilate information from a number of sources. Physical signs are immediately and easily available to the clinician without expense or discomfort to the patient. On the last day each student will be expected to examine one patient fully and demonstrate the abnormal physical signs. They will also be

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Cardiovascular  
INPATIENT: 50%  
OUTPATIENT: 50%
2. Respiratory  
CONSULTATION: N/A%  
PRIMARY CARE: N/A%
3. Abdominal  
4. Neurologic  
5. Musculo-skeletal  
6. Ophthalmologic

CLOSE CONTACT WITH:  
X FULL TIME FACULTY

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  
*Identify the organ system abnormality shown in three short cases. The patients will be those with stable abnormal physical signs recruited from the Dept. of Medicine inpatient services or outpatient clinics and brought to the hospital specifically for this course.
ME253.01 MINMET SHORTAGE AREA PRECEPTORSHIP

Advanced Clinical Clerkship

Location: ASSOC

1998-99

COURSE CHAIR: PHONE #:
David E. Hayes-Bautista, Ph.D. (310)-794-0663

SUPPORTING FACULTY:
Coordinator: Robert Montoya, M.D., M.P.H.

STUDENT COORDINATOR: PHONE #:
Robert Montoya, M.D., M.P.H. (916) 654-1433 or (916) 654-1836

REPORT TO:
Robert Montoya, M.D., M.P.H. (916) 654-1433

PREREQUISITES: None

AVAILABLE TO EXTERNs: yes

STUDENTS / PERIOD: max 15 min 4

DURATION: 2-6 weeks

1998-99 ELECTIVES BEGIN WEEKS:
By Arrangement

DESCRIPTION: Purpose is to prepare students for future practice in minority shortage areas of Calif. Ideally, students should take course when it is given in the area that they plan to practice in. Students attend a seminar series covering minority health policy issues and practical issues in preparing for minority shortage area practice. Students will get to know and work with 5-15 medical students from California and out-of-state medical schools who plan to practice in the same shortage area in the future. Preceptors are role models delivering good medical care to largely minority shortage area patients. Program is flexible in scheduling students to take course in shortage area of their choice. Seminars will be accompanied by a syllabus of readings on minority health policy issues.

LEARNING OBJECTIVES (in order of importance)

1. To prepare students to begin practice in a minority shortage area of California in the 1990s and successfully become a permanent, long-term source of health care in that area in the future.

2. To acquaint students with the health policy, health economics, health care organization, and other issues which will affect the delivery of effective health care in minority shortage areas of California in the 1990s and beyond.

3. To put 5-15 medical students attending various U.S. medical schools, who are planning to practice in a specific minority shortage area, in contact with each other for future joint activities or group practice in that shortage area.

4. To put students in contact with successful physicians, medical directors, clinic administrators, and others in a shortage area with whom they may work in the 1990s.

5. To become acquainted with the opportunities and methods of delivering effective healthcare to minority shortage area patients through actual participation in the day-to-day work of a physician who is successfully delivering care to such patients.

LEARNING OBJECTIVES:

COMMON PROBLEMS/DISEASES

1. Infectious diseases
2. Nutritional Problems
3. Diseases of minority shortage area persons
4. Problems of access to adequate health care

STUDENT EXPERIENCES

STUDENT EXPERIENCES

INPATIENT: 0-20%

CONSULTATION: 0%

OUTPATIENT: 80-100%

PRIMARY CARE: 100%

CLOSE CONTACT WITH:

X FULL TIME FACULTY

X CLINICAL FACULTY

FELLOWS

RESIDENTS

X OTHER: Medical students, medical directors, administrators of major clinics and facilities in the area.

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: varies: 30-100

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: varies.

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Preceptor Patient care (Seminar and Discussion 2 or 3 Mondays)</td>
<td>Preceptor Patient care (Seminar and Discussion 2 or 3 Tuesdays)</td>
<td>Preceptor Patient care</td>
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<tr>
<td>PM</td>
<td>Preceptor Patient care (Seminar and Discussion 2 or 3 Mondays)</td>
<td>Preceptor Patient care (Seminar and Discussion 2 or 3 Tuesdays)</td>
<td>Preceptor Patient care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Voluntary group social activities (dinner, bar-b-que) attended by students, preceptors, seminar speakers.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: A brief student project can be done individually or in small groups. Students should have access to a car to travel to seminars; students in one area can carpool to seminar site. Housing may be available for students w/preceptors or others, if needed. Bilingual skills in English & Spanish not required, but would be very helpful.
Advanced Clinical Clerkship

Location: KDMC

1998-99

COURSE CHAIR: 
Gus Gill, M.D. 
(310)-668-4536

SUPPORTING FACULTY:

STUDENT COORDINATOR: 
Adeleh Esfandiari, DVM, Ph.D. 
(213)-563-5986

REPORT TO: Adeleh Esfandiari, DVM, Ph.D.

PREREQUISITES: Medicine & Pediatrics Core Rotations & Tropical Medicine/Int'l Health Didactic Elective

AVAILABLE TO EXTERNs: No

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: By Arrangement

DESCRIPTION: This clerkship is designed to expose students to clinical medicine in developing countries. Under supervision, students will assume responsibility for the day-to-day clinical care of patients in hospitals, clinics, and or private practices.

LEARNING OBJECTIVES (in order of importance)

1. To actively participate in the diagnosis & management of diseases found in developing countries.
2. To sharpen microscopic & radiologic diagnostic & management skills.
3. To understand the health care delivery systems in developing countries through actual participation.
4. To become acquainted with social nuances & their influence on health and the delivery of health care.
5. To learn the significance & mechanisms of "team approach" to health care and the delivery of health care.
6. To learn the relationship between and importance of multi-disciplined (i.e., agriculture, transportation, communication) sectors to health care.
7. When possible and significant, to interface with traditional health systems.
8. To understand the health budgetary constraints and how health care is affected.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
Variable with each assignment
1. Parasitic infections
2. Nutritional disorders
3. Health of pregnant & lactating women
4. Communicable childhood diseases, and general pediatric diseases
5. Internal medicine problems

INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 0%
PRIMARY CARE: 100%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
FELLOWS
RESIDENTS
INTERNS
X OTHER Expert Consultants & Clinical supervisors

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 75
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 250

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Collect lab data, etc; 9:00 - 11:00 Chart review, discussion of newly admitted patients &amp; ward rounds with preceptor</td>
<td>9:00 - 11:00 Chart review, discussion of newly admitted patients &amp; ward rounds with preceptor</td>
<td>9:00 - 11:00 Chart review, discussion of newly admitted patients &amp; ward rounds with preceptor</td>
<td>9:00 - 11:00 Chart review, discussion of newly admitted patients &amp; ward rounds with preceptor</td>
<td>9:00 - 11:00 Chart review, discussion of newly admitted patients &amp; ward rounds with preceptor</td>
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<tr>
<td></td>
<td>11:00 - 12:00 Microbiology laboratory</td>
<td>11:00 - 12:00 Radiology unit</td>
<td>11:00 - 12:00 Microbiology laboratory</td>
<td>11:00 - 12:00 Microbiology laboratory</td>
<td>11:00 - 12:00 Microbiology laboratory</td>
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<td>1:30 - 4:00 Hospital outpatient clinic</td>
<td>1:30 - 4:00 Puriurban or rural clinic</td>
<td>1:30 - 4:00 Preceptor’s private clinic &amp;/or meetings w/MOH officials</td>
<td>1:30 - 4:00 Preceptor’s private clinic &amp;/or meetings w/MOH officials</td>
<td>1:30 - 4:00 Hospital outpatient clinic</td>
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<td>4:00 - 5:30 Afternoon inpatient rounds</td>
<td>4:00 - 5:30 Afternoon inpatient rounds</td>
<td>4:00 - 5:30 Afternoon inpatient rounds</td>
<td>4:00 - 5:30 Afternoon inpatient rounds</td>
<td>4:00 - 5:30 Afternoon inpatient rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On-call twice weekly. Clinical duties Saturday mornings.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Clerkships available in Liberia, Swaziland, Kenya, and Indonesia. Travel and housing assistance possible, but not guaranteed. All clerkships occur in developing countries and are supervised by preceptors and or a Drew Faculty clinician.
Advanced Clinical Clerkship  Location: WVA  1998-99

COURSE CHAIR:  PHONE #:
Shavarsh Chrissian, M.D.  (310) 478-3711 ext. 48321
FAX: (310) 268-4935

SUPPORTING FACULTY:
Rehabilitation Medicine Service Staff

STUDENT COORDINATOR:  PHONE #:
Beatrice C. Blake  (310) 478-3711 ext. 48315

REPORT TO: West Los Angeles VA Medical Center, Bldg. 500,
Room 1419, 8:00 am.

LEARNING OBJECTIVES (in order of importance)
1. Clinical skill in history taking and physical examination.
2. Knowledge of disease process in Stroke, Amputation, low back
   and other musculoskeletal pain syndrome.
3. Medical judgment in management of the disabled patient.
4. Utilization of the health care team.
5. Interpretation of tests: Electromyography, bone and joint x-
   rays.
6. Basic science: principles of physiology and anatomy correlated
   with clinical problems.
7. Cost effectiveness of Rehabilitation.

AVAILABLE TO EXTERNALS: yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 2 or 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
By Arrangement

DESCRIPTION: This clerkship provides an introduction to PM&R thru supervised clinical experience. Patients will be examined and treatment programs carried out under supervision of the Rehabilitation Medicine Staff. An introduction to Electromyography is included.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Stroke
2. Amputation
3. Back strain
4. Disc syndrome
5. Other musculoskeletal pain
6. Spinal cord lesion
7. Arthritis
8. Head injury

INPATIENT: 30%
OUTPATIENT: 70%
CONSULTATION: 30%
PRIMARY CARE: 70%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
CLINICAL FACULTY
FELLOWS
X RESIDENTS
INTERNS
X OTHER Physical & Occupational Therapists

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20+
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 600

TYPICAL WEEKLY SCHEDULE

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<tr>
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<tbody>
<tr>
<td>AM</td>
<td>X-Ray conference Patient evaluation* Electromyography</td>
<td>Neurology case presentation and discussion Patient evaluation*</td>
<td>Patient/rounds RMS Bed service Electromyography</td>
<td>PM &amp; R grand rounds: CME accredited Amputee clinic Electromyography</td>
<td>Brace or wheelchair clinic Patient evaluation* Somatosensory Evoked Potentials</td>
</tr>
<tr>
<td>PM</td>
<td>Patient evaluation* Prosthetics or musculoskeletal lecture series Core lecture annual lecture series</td>
<td>Patient evaluation* Electromyography</td>
<td>Chronic pain clinic Patient evaluation* Neurolysis (Nerve and muscle block) clinic</td>
<td>Patient evaluation* Electromyography</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No night call.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: A student on this clinical clerkship usually spends two weeks on each of the Rehabilitation Medicine Services below: 1. Bed Service - student will be primary care physician for selected rehabilitation inpatients. 2. Outpatient Clinic - Student works with musculoskeletal complaint cases. A twenty minute presentation on a topic relating to Rehabilitation is required. *Rehab med. bed service or out-patient clinic.
LEARNING OBJECTIVES (in order of importance)
1. Clinical skills in history taking and physical exam of patients with physical disabilities.
2. Knowledge of disease process in stroke and other neurological disabling diseases, amputation, musculoskeletal pain, and physical disabilities.
3. Medical judgment in management of the patients with disabilities.
4. Interpretation of tests: Electromyography, Bone and Joint x-rays, MRI.
5. Utilization of and interaction with the health care interdisciplinary team.

DESCRIPTION: The student will be exposed to PM&R, which includes treatment and management of patients with multiple disabilities, i.e., neurologic, rheumatologic, geriatric and/or orthopedic pathology. The student will be introduced to team approach in health care by working with physical and occupational therapists, social workers, and other allied health professionals.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Musculoskeletal disorders
2. Degenerative joint disease
3. Low back & neck pain
4. Peripheral neuropathy
5. Stroke
6. Amputation
7. Sports medicine
8. Trauma

INPATIENT: N/A%
OUTPATIENT: 100%
CONSULTATION: 70%
PRIMARY CARE: 30%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Phys. Therapists, Occupational Therapists & Kinesiotherapists

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 25-30
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 280-300

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Outpatient EMG</td>
<td>Rheumatology Outpatient Clinic</td>
<td>Outpatient evaluation clinic</td>
<td>Medicine grand rounds</td>
<td>Out-Patient Evaluation clinic</td>
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<td>Rheumatology Conf.</td>
<td></td>
<td>RMS Conference &amp; Journal Club</td>
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<tr>
<td>PM</td>
<td>Outpatient EMG</td>
<td>1:00 - 4:30pm Lecture @ Wadsworth, VA</td>
<td>Amputee/Brace Clinic Wheelchair Clinic</td>
<td>Musculoskeletal - Sports Medicine Clinic</td>
<td>Prime curriculum</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME254.03  PHYSICAL MEDICINE & REHABILITATION INTRODUCTION

Advanced Clinical Clerkship  Location:  CS  1998-99

COURSE CHAIR:  Richard Riggs, M.D.
PHONE #:  (310)-855-3272

LEARNING OBJECTIVES (in order of importance)
1. To introduce the intellectual and philosophical clinical approach to patients with disabilities and handicaps.
2. To have students perform full rehabilitation assessments, including cognitive and emotional evaluations as well as the addressing of physical disabilities.
3. To have students observe team interaction to problem solving and efficient inpatient rehabilitation management as well as the physician’s role of organizer and administrator.
4. To have students observe out-patient management of disabilities like musculoskeletal pain and stroke syndromes.
5. To have students understand how rehabilitation interfaces with other medical specialties by contact with patients’ physicians.
6. To have students understand the common medical and surgical workups associated with rehabilitation problems.
7. To understand methods of approaching difficult patient behaviors.
8. To understand research frontiers in the field, current cost issues, discharge planning.

SUPPORTING FACULTY:  Cynthia Mathis, M.D.

STUDENT COORDINATOR:  Michelle Demond
PHONE #:  (310)-855-3148

REPORT TO:  Michelle Demond MOB RM 280 W.

PREREQUISITES:  Medicine

AVAILABLE TO EXTERNS:  no

STUDENTS / PERIOD:  max 2  min 0

DURATION:  2-4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1,3,5,7,9,15,17,21,23,25,27,29,31,33,35,37,39,41,43,45,47,49,51

LEARNING OBJECTIVES (in order of importance)
1. To introduce the intellectual and philosophical clinical approach to patients with disabilities and handicaps.
2. To have students perform full rehabilitation assessments, including cognitive and emotional evaluations as well as the addressing of physical disabilities.
3. To have students observe team interaction to problem solving and efficient inpatient rehabilitation management as well as the physician’s role of organizer and administrator.
4. To have students observe out-patient management of disabilities like musculoskeletal pain and stroke syndromes.
5. To have students understand how rehabilitation interfaces with other medical specialties by contact with patients’ physicians.
6. To have students understand the common medical and surgical workups associated with rehabilitation problems.
7. To understand methods of approaching difficult patient behaviors.
8. To understand research frontiers in the field, current cost issues, discharge planning.

DESCRIPTION:  The course will introduce the scope and management of the diverse problems addressed by the field of physical medicine and rehabilitation. Problems range from isolated musculoskeletal disorders to complex team rehabilitation of the severely handicapped individual.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Musculoskeletal pain
2. Gait disorders
3. Wheelchair prescription
4. Cognitive assessment
5. Stroke syndromes
6. Amputations
7. Medication side-effects
8. Family assessments

INPATIENT:  75%
OUTPATIENT:  25%
CONSULTATION:  100%
PRIMARY CARE:  0%

CLOSE CONTACT WITH:
FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER All therapists, MSWs, psychologists

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  OPD =10, INPT=20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  OPD=100, INPT=200

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 10:00 Rounds on rehabilitation 10:00 - 12:00 Consults Therapy observation</td>
<td>8:00 - 9:00 Rounds on Rehab unit 9:00 - 10:00 Team meeting 10:00 - 12:00 Consults Therapy observation</td>
<td>8:00 - 9:00 Rounds on Rehab unit 9:00 - 12:00 Consults Therapy observation</td>
<td>8:00 - 9:00 Rounds on Rehab unit 9:00 - 11:00 Consults Therapy observation 11:00 - 12:00 Conference</td>
<td>8:00 - 9:00 Rounds on Rehab unit 9:00 - 11:30 Consults Therapy observation</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 - 1:00 Noon conference (optional) 1:00 - 5:00 Consults, rounds</td>
<td>12:00 - 1:00 Noon conference (optional) 1:00 - 3:00 Didactic PM&amp;R Lectures @ Wadsworth VA</td>
<td>12:00 - 1:00 Brain Injury Group Study 1:00 - 5:00 Outpatient Clinic</td>
<td>12:00 - 1:00 Noon conference 1:00 - 3:00 Outpatient clinic 3:30 - 5:00 Conference</td>
<td>11:30 - 1:00 Didactic PM&amp;R Lectures @ Cedars 1:00 - 5:00 Consults, rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Possible phone call week nights with Saturday/Sunday rounding depending on attending schedule.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  This elective is suitable and useful for any medical student regardless of future training plans. In addition, any student seriously considering a residency in Physical Medicine and Rehabilitation would obtain a good exposure to the field through this rotation.

164
ME257.01  WOMEN’S HEALTH

Advanced Clinical Clerkship  Location:  MULTIPLE  1998-99

COURSE CHAIR:  Ellen F. T. Yee, M.D., MPH  PHONE #:  (818) 891-7711 x5275

SUPPORTING FACULTY:  Lisa Altman, M.D., Marion Ho, M. D., Giulia Michelini, M.D.

STUDENT COORDINATOR:  Marianne Kimmerle  PHONE #:  (818) 895-9453

REPORT TO:  Building 200, Room 3424, 8:30 a.m.

PREREQUISITES:  Medicine, Ob-Gyn

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 1  min 1

DURATION:  4 weeks


DESCRIPTION:  This elective designed to train students to provide comprehensive primary care for women. Students will rotate through different women’s health clinics in order to maximize their experiences. Students will be expected to complete a project of their choice related to their interest in women’s health. There is some flexibility in tailoring the schedule to fit the needs of the individual student.

COURSE OBJECTIVES (in order of importance)


2. Improve clinical skills such as medical interviewing, physical exam (breast exam, pelvic exam), procedural skills (pap smears).

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Health maintenance issues
2. Cervical cancer
3. Breast cancer
4. Menopause and hormone replacement
5. Cardiovascular disease
6. Mental health issues
7. Uterine bleeding
8. Contraception

INPATIENT:  0%
OUTPATIENT:  100%
CONSULTATION:  50%
PRIMARY CARE:  50%
CLOSE CONTACT WITH:
FULL TIME FACULTY
CLINICAL FACULTY
FELLOWS
RESIDENTS
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  variable
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  N/A

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>Clinic</td>
<td>Sepulveda Procedure Clinic</td>
<td>Clinic</td>
<td>West LA Women’s Health Clinic</td>
<td>Clinic</td>
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<tr>
<td>PM</td>
<td>Clinic</td>
<td>Sepulveda Women’s Health Clinic</td>
<td>Sepulveda Gynecology Clinic</td>
<td>Clinic</td>
<td>Clinic</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship

COURSE CHAIR: Harvey C. Gonick, M.D.  PHONE #: (310)-855-7880

SUPPORTING FACULTY: Drs. Fichman, Makoff, Rodrigues, Jordan, Cohen, Nast, Klein, Levine

STUDENT COORDINATOR: Judy Jacobs  PHONE #: (310)-855-4658

REPORT TO: Judy Jacobs, Cardiology Conference Room, Rm5413, 9:00 am.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37.

DESCRIPTION:

LEARNING OBJECTIVES (in order of importance)
1. Perform a proper history and physical examination for the nephrology patient.
2. Become proficient in the differential diagnosis and management of fluid, electrolyte, and acid-base problems.
3. Acquire knowledge of the clinical strategy in evaluation of the patient with renal disease.
4. Develop a practical approach to diagnosis and medical management of hypertension.
5. Review and update basic knowledge of renal physiology.
7. Exposure to similar problems in the pediatric population through the integrated teaching program of adult and pediatric nephrology at Cedars-Sinai.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Fluid & Electrolyte disorders
2. Hypertension
3. Renal Failure
4. Transplantation (Renal)
5. Hemodialysis
6. Renal Immunology
7. Imaging techniques in nephrology
8. Acute & chronic renal diseases

INPATIENT: 85%
OUTPATIENT: 15%
CONSULTATION: 95%
PRIMARY CARE: 5%
OTHER

TYPICAL WEEKLY SCHEDULE:

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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Journal Club B-203 Conf. Rm. Becker Bldg. 9:00 - 12:00 Transplant Clinic (T. fellow)</td>
<td>8:00 - 9:00 HM 446 Renal Gr. Rds (combined with Endo once/month) All flws, residents &amp; students 10:00 -12:00 Attending rds 6SW Conference Rm. Flxs, residents &amp; students</td>
<td>8:30 - 12:00 Wadsworth VA Renal Clinic C Flxs, residents &amp; studnts. CAPD Clin Dr. Rodriguez T. fellow</td>
<td>7:00 - 8:00 UCI/VA Renal Grand Rds, 3rd fl. VA Conf Rm; 10:00 -11:00 Attending Rds 6SW Conf. Rm Fellows, Residents Students 11:00 - 12:00 Fluid &amp; Electrolyte Conf. 6SW Conf Room</td>
<td>7:15 - 8:15 UCLA Did. Pathophysiology, Wads. VA Room 114 All Fell, Res, Studs. 8:15 - 9:15 Res in Progress, Wads VA All Fell, 9:30 - 10:30 Hypertens Rds, S. Franklin, M.D. 10:00 -12:00 Attending Rds 6SW Conf Rm.</td>
</tr>
<tr>
<td>PM</td>
<td>12:45 - 1:30 Renal Pathology Conf. Rm. 8610 Fellows, residents, students. Dr. A. Cohen 4:00 -6:00 Transplant Rounds (T. fellow) 4:00-5:00 Hemodialysis Rds. (consult fel. Rodriguez)</td>
<td>1:30 - 2:30 Transplant Rds (T. fellow) 6SW Conf. Rm.</td>
<td>1:30 - 2:30 Transplant Rds (T. fellow)</td>
<td>1:30 - 3:30 Transplant Rds (T. fellow)</td>
<td>12:45 - 1:30 Renal Path Conf. Rm 8610, Fellows, Residents, Students 1:30-2:30 Transplant Rds. (T.fellow); 1:30-4:30 2nd &amp; 4th wks CSMC Renal Clinic (C.fellow,student) Ambulatory Care Center 4:00-5:00 Hemodialysis Rds. 3C. Fellow, Rodriguez</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: None
COURSE CHAIR:  
Drs. G. Danovitch & Ira Kurtz  
PHONE #:  
(310)-206-6741

SUPPORTING FACULTY:  
A. Nissenson, A. Wilkinson, W. Goodman, M. Nguyen

STUDENT COORDINATOR:  
Else Barrogan  
PHONE #:  
(310)-206-6741

REPORT TO:  
Consult Fellow, Factor Bldg. 7-155 8:00 am.

AVAILABLE TO EXTERNS:  yes

PREREQUISITES:  Medicine

AVAILABLE TO EXTERN:  yes

STUDENTS / PERIOD:  max 2  min 1

DURATION:  4 weeks

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of hypertension, acid-base abnormalities, hyper- and hypomolar syndromes, electrolyte abnormalities, and acute and chronic renal failure.
2. The use of antibiotics, cardiac and vasoactive agents in renal failure and antihypertensives.
3. Clinical skills: medical interviewing and physical examination.
5. The interpretation of acid-base parameters, fluid-electrolyte levels, and the workup of hypertensive patients.
6. Special skills such as: reading IVPs, renal scans, cat scans, and ultrasound.
7. Diagnosis and management of complex inpatient problems.
8. Library research and interpretation of literature.
9. Basic science foundation of pathophysiologic mechanisms.
10. Specialized patient care, e.g., dialysis.

DESCRIPTION:  
This elective provides an excellent opportunity to learn about and manage renal disease in patients with frequent multisystem dysfunction. The student is given responsibility under the supervision of faculty, fellows, and residents. The students are also expected to participate in the chronic dialysis and the transplantation meetings, where this is applicable to their patients. Active participation is stressed continually. The formal teaching sessions include Renal Radiology, Renal Pathology, and Renal Grand Rounds. The fellows will have prepared a discussion of a specific area of renal pathophysiology or renal physiology, before which all students are urged to have read some of the pertinent material.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute renal failure
2. Chronic renal failure
3. Acid-base disturbances
4. Fluid and electrolyte abnormalities
5. Calcium/phosphorus abnormalities
6. Renal stone disease
7. Hypertension—primary & secondary

INPATIENT:  80%
OUTPATIENT:  20%
CONSULTATION:  100%
PRIMARY CARE:  %

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  50-60

TYPICAL WEEKLY SCHEDULE

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<thead>
<tr>
<th>Hour</th>
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<tr>
<td>AM</td>
<td>8:30 - 12:45</td>
<td>7:30 - 8:15</td>
<td>8:30 - 9:30</td>
<td>7:00 - 8:00</td>
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<tr>
<td></td>
<td>Transplant clinic</td>
<td>Renal conference</td>
<td>Medical grand rounds</td>
<td>Renal grand rounds</td>
<td>Pathophysiology conf.</td>
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<td></td>
<td>11:00 - 1:00</td>
<td>8:30 - 12:45</td>
<td>11:00 - 12:00</td>
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<td>Consult attending rounds</td>
<td>Transplant clinic</td>
<td>CAPD Meeting</td>
<td>Transplant clinic</td>
<td>Chief rounds</td>
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<tr>
<td>PM</td>
<td>1:00 - 4:00</td>
<td>1:30 - 2:30</td>
<td>1:00 - 3:00</td>
<td>1:30 - 2:30</td>
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<tr>
<td></td>
<td>General Nephrology clinic</td>
<td>Transplant attending rounds</td>
<td>Consult attending rounds</td>
<td>Transplant attending rounds</td>
<td>Radiology rounds</td>
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<td>3:00 - 5:00</td>
<td>2:30 - 3:30</td>
<td>3:00 - 5:00</td>
<td>3:00 - 5:00</td>
<td>4:00 - 5:30</td>
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<tr>
<td></td>
<td>Consult attending rounds</td>
<td>Hemodialysis attending rounds</td>
<td>Consult attending rounds</td>
<td>Consult attending rounds</td>
<td>Consult attending rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Students are not included in the on-call schedule.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship  
**Location:** SFVMP  
1998-99

**COURSE CHAIR:**  
David B.N. Lee, M.D., Chief  
PHONE #:  
(818)-895-9395

**SUPPORTING FACULTY:**  
Drs. N. Yanagawa, D. Corry, P.C. Pham, M. Roberts

**STUDENT COORDINATOR:**  
Marianne Kimmerle  
PHONE #:  
(818)-895-9394

**REPORT TO:**  
Marianne Kimmerle, Bldg. 200, Room 3424, 8:30 am.

**PREREQUISITES:**  
Medicine

**AVAILABLE TO EXTERNS:** yes

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

**DURATION:** 4 weeks

**1998-99 ELECTIVES BEGIN WEEKS:**  
1,5,9,13,17,21,25,29,33,37,41,45,49.

**DESCRIPTION:**  
Teaching will occur at both Sepulveda VA Medical Center & Olive View Medical Center facilities. Students will be directed to the best teaching cases of the two facilities for the most optimal teaching experience.

**LEARNING OBJECTIVES (in order of importance)**

1. Pathophysiology and clinical management of common acid-base disturbances, fluid and electrolyte abnormalities, acute and chronic renal failure, and glomarular and interstitial nephropathies.
2. Knowledge of diuretic agents, nephrotoxic drugs, immunosuppressive drugs, vitamin D metabolites, antihypertensive agents.
3. Experience in data analysis, synthesis, integration, and documentation for effective presentation and decision making.
4. Exposure to clinical problems associated with uremia, dialysis, and transplantation.

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**

1. Acute renal failure
2. Drug-induced nephrotoxicity
3. Chronic renal failure
4. Acid base/electrolyte abnormalities
5. Glomuliar and interstitial nephropathies
6. Divalent Ions abnormalities
7. Hypertension
8. Renal stones

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 66%</th>
<th>OUTPATIENT: 34%</th>
<th>CONSULTATION: 66%</th>
<th>PRIMARY CARE: 34%</th>
<th>CLOSE CONTACT WITH:</th>
<th>X FULL TIME FACULTY</th>
<th>X CLINICAL FACULTY</th>
<th>X FELLOWS</th>
<th>X RESIDENTS</th>
<th>X INTERNS</th>
<th>OTHER</th>
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<tbody>
<tr>
<td>Acute renal failure</td>
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<tr>
<td>Drug-induced nephrotoxicity</td>
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<td>Chronic renal failure</td>
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**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 20

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** 40

**TYPICAL WEEKLY SCHEDULE**

<table>
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<tr>
<th>Hour</th>
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<tr>
<td></td>
<td></td>
<td>8:00 - 8:30 Chief’s seminar</td>
<td>8:30 - 12:00 Renal clinic @ SVAMC</td>
<td>7:00 - 8:00 Renal grand rounds</td>
<td>7:15 - 8:15 Renal pathophysiology</td>
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<tr>
<td>AM</td>
<td>Noon conference</td>
<td>12:00-1:00 Journal Club or Renal Imaging (last Tuesday)</td>
<td>Noon Conference</td>
<td>8:30 -9:30 Medical grand rounds</td>
<td>8:15 - 9:15 Research seminar</td>
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<td>2:00 - 4:00 Consult rounds</td>
<td>2:00 - 4:00 Consult rounds</td>
<td>10:00 - 12:00 Nephrology Core curr.</td>
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<td></td>
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<td>2:00 - 4:00 Consult rounds</td>
<td>2:00 - 4:00 Consult rounds</td>
<td>Noon conference</td>
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<td></td>
<td>2:00 - 4:00 Consult rounds</td>
<td>2:00 - 4:00 Consult rounds</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:**

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**
LEARNING OBJECTIVES (in order of importance)
2. Medical judgment, analysis of medical data, and synthesis of information.
3. Interpretation of tests: Electrolytes, blood gases, urinalysis.
4. Oral presentations.
5. Medical record keeping; data collection and recording.
6. Knowledge of drugs, particularly antihypertensive drugs.
7. Diagnosis and management of complex in-patient problems, particularly renal failure.
8. Knowledge of techniques or procedures: peritoneal and hemodialysis.

DESCRIPTION: The Division of Nephrology & Hypertension at Harbor-UCLA is responsible for an active consultative service on the general medical and other wards of a large county hospital. There are numerous didactic sessions, seminar opportunities, and discussion with full-time staff. Students are free to attend any other teaching conferences at Harbor and spend time in the division research laboratories.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Fluid and electrolyte problems
2. Acid base disorders
3. Acute renal failure
4. Hypertension
5. Acute glomerulonephritis
6. Chronic renal failure
7. Nephrotic syndrome
8. Urinary tract obstruction

INPATIENT: 75%
OUTPATIENT: 25%
CONSULTATION: 90%
PRIMARY CARE: 10%
CLOSE CONTACT WITH: X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:30 - 10:00 Medical grand rounds</td>
<td>10:00 - 12:00 Consult rounds</td>
<td>9:30 - 11:00 Core curriculum lecture</td>
<td>8:30 - 12:00 noon Nephrology Clinic</td>
<td>7:15 - 8:15 Basic science seminar*</td>
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<td></td>
<td>Noon-Medicine lecture series</td>
<td>1:00-2:30 Neph Grand Rds /3:00-5:00 Neph Attending Rds</td>
<td>2:00 - 4:00 Consult rounds</td>
<td>12:00 - 1:30 Renal Biopsy conference+</td>
<td>8:15 - 9:15 Research seminar</td>
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<td></td>
<td>5:00 - 6:00 Transplant rounds (optional)</td>
<td>5:00 - 6:00 Transplant rounds (optional)</td>
<td>4:30 - 5:30 Journal club</td>
<td>Noon - Morbidity and Mortality conference</td>
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<tr>
<td></td>
<td>12:00 - 1:15 Renal Biopsy conference+</td>
<td>1:30 - 4:00 Hypertension Clinic</td>
<td>3:00 - 5:00 Consult rounds</td>
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</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: * Meet at Wadsworth VA for entire combined UCLA. Nephrology Program; + Meet once monthly
LEARNING OBJECTIVES (in order of importance)

1. Approach to the diagnosis and management of patients with glomerulonephritis, hypertension, acute and chronic renal failure.
2. Diagnosis and management of fluid-electrolyte and acid-base disturbances.
3. Application of physiologic principles to the understanding of renal pathophysiology.
4. Knowledge of the pharmacology of diuretics and use of antibiotics and other drugs in patients with renal disease.

STUDENT EXPERIENCES

1. Acute renal failure
2. Chronic renal failure
3. Proteinuria
4. Complications of Dialysis therapy
5. Electrolyte disturbances
6. Acid-base disorders
7. Hypertension
8. Glomerulonephritis

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 16
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 50

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>In-patient workups/didactic sessions</td>
<td>7:30-8:30 Journal Club</td>
<td>8:30 - 11:30: Renal clinic</td>
<td>7:00 - 8:00: Renal grand rounds</td>
<td>7:15 - 8:15 Pathophysiology Seminar (UCLA-CHS participation) 8:15 - 9:15 Research in progress (UCLA-CHS participation) In-patient workups didactic</td>
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<td>9:00 - 12:00: In-patients workups/didactic sessions</td>
<td>9:00 - 12:00: In-patients workups/didactic sessions</td>
<td>9:00 - 12:00: Hypertension clinic</td>
<td>9:00 - 12:00: Medical grand rounds Attending rounds In-patient workups</td>
<td>1:30 - 3:30: Attending rounds</td>
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<tr>
<td>PM</td>
<td>1:30 - 3:30: Attending rounds</td>
<td>1:30 - 3:30: Attending rounds</td>
<td>1:30 - 3:30: Medical grand rounds Attending rounds In-patient workups</td>
<td>1:30 - 3:30: Attending rounds</td>
<td>1:30 - 3:30: Attending rounds</td>
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<tr>
<td></td>
<td>In-patient workups</td>
<td>1:30 - 3:30: Attending rounds</td>
<td>4:00 - 5:00: Case conference</td>
<td>4:00 - 5:00: In-patient workups</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: It is expected students will learn the approach to the diabetic patient, the workup of acute & chronic renal failure, and appropriate management of the approach & treatment of hypertension & how to evaluate and manage acid-base & fluid & electrolyte disorders. The student will also have exposure to peritoneal and hemodialysis, as well as Continuous Ambulatory Peritoneal Dialysis (CAPD). The outpatient experience is designed to familiarize the student w/ the longitudinal course of renal disease and offer a more practical approach to diagnosis and management of problems in Nephrology.
Advanced Clinical Clerkship

Location: ST. MARY

1998-99

COURSE CHAIR:
Drs. P. Barrett & C. Calesicbetta
PHONE #: (562)-491-9350, 562-491-9240

SUPPORTING FACULTY:
Nephrology Attending Staff

STUDENT COORDINATOR:
Julie Bishop
PHONE #: (562)-491-9350

REPORT TO: Department of Medical Education, 529 E. 10th St., Long Beach, CA 90813.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 21, 25, 29, 33, 37.

DESCRIPTION:

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of acute and chronic renal disease, acid-base disturbances, and fluid-electrolyte disorders.
2. Knowledge of the medical problems of patients with chronic renal failure.
4. Oral presentations.
5. Library research.
6. Awareness of cost effectiveness in clinical decision making.
7. Gain experience in a consultative role.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Renal failure - chronic
2. Renal failure - acute
3. Hemodialysis and its complications
4. Acid-base disorders
5. Fluid-electrolyte disorders

INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 25%
PRIMARY CARE: 75%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 35

TYPICAL WEEKLY SCHEDULE

<table>
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<tbody>
<tr>
<td>AM</td>
<td>Work Rounds</td>
<td>Work Rounds</td>
<td>Nephrology Core Curriculum</td>
<td>Work Rounds</td>
<td>Work Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>Noon Teaching Conference</td>
<td>Teaching Conference</td>
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<tr>
<td></td>
<td>Patient Care</td>
<td>Attending Rounds</td>
<td>Patient Care</td>
<td>Renal Grand Rounds</td>
<td>Attending Rounds</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No required night call; weekend responsibilities vary.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: By arrangement, a room within the hospital may be available for the entire month’s rotation. St. Mary Medical Center 1050 Linden Avenue, Box 887 Long Beach, Ca 90801
LEARNING OBJECTIVES (in order of importance)

1. Acquire knowledge of major renal syndromes.

2. Acquire knowledge of therapeutic modalities available to treat renal disease, including dietary manipulation, dialytic treatment, and renal allotransplantation.

3. Acquire knowledge of methods of diagnosis and workup of patients with renal disease through logical reasoning.

4. Acquire knowledge of detailed examination of urine and interpretation of findings.

5. Acquire knowledge of various fluid and electrolyte and acid-base derangements and their management.

6. Acquire expertise in writing clear and succinct consultation notes.

DESCRIPTION: This is a clinically oriented consultation service which provides exposure to a wide variety of renal disease and fluid-electrolyte and acid-base derangements. Students will be expected to see up to 5 patients per week, workup each patient, and present and discuss the findings with the renal faculty. For inpatient workups and discussions, emphasis will be on problem solving using logical, reasoned thinking rather than mere reciting of irrelevant facts. Laboratory demonstrations will provide exposure to detailed examination of urine.
Advanced Clinical Clerkship

Location: KAISER.SUN

LEARNING OBJECTIVES (in order of importance)
1. Diagnosis and management of complex in- and out-patient problems related to acute and chronic renal disease.
2. Experience with patients on chronic hemodialysis and peritoneal dialysis.
4. Interpretation of test involved in the management of kidney disease such as Renal Ultrasound, IVP, Kidney Biopsy, ABG, and Chemistry Panels.
5. Indication and complication of Hemodialysis, Peritoneal Dialysis, and Hemofiltration.
6. Deliver concise oral presentations and be able to formulate consultations in a concise written format.

DESCRIPTION: The Nephrology Service welcomes students to its clerkship program. We see patients with a wide variety of acute and chronic renal diseases. The students’ responsibilities will include seeing in- and out-patient consultations and follow-up care with renal fellows and staff physicians, participation in informal conferences, Teaching Rounds, Work Rounds, and Seminars. The option to attend other Subspecialty Conferences will be part of the student’s experience.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute renal failure
2. Chronic renal failure
3. Hemodialysis problems
4. Peritoneal Dialysis problems
5. Hypertension
6. Proteinuria
7. Fluid and Electrolyte imbalance
8. Acid/base imbalance

INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 70%
PRIMARY CARE: 30%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Hemodialysis, Ancillary staff

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 16
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>8:00 - 8:30 AM</td>
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<td>Renal grand rounds</td>
<td>Patient Care Conference</td>
<td>Renal Journal Club or Dialysis Conference</td>
<td>Consultation rounds</td>
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<td>1:30 - 2:00 PM</td>
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<td>Renal Journal Club &amp; Patient Problem</td>
<td>Medicine Grand rounds</td>
<td>Urology grand rounds</td>
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<td>Kidney stone clinic (optional)</td>
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<td>Conference</td>
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<td>Transplant clinic (optional)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: All students get free parking while on rotation.
Advanced Clinical Clerkship  
**Location:** CS  
**1998-99**

**COURSE CHAIR:**
Zab Mohsenifar, M.D.  
PHONE #: (310)-855-4685

**SUPPORTING FACULTY:**
Drs. Michael Lewis and David Ross

**STUDENT COORDINATOR:**
Judy Jacobs  
PHONE #: (310)-855-4658

**REPORT TO:**
Judy Jacobs, Cardiology Conference Room, Room 5413, North Tower, 9:00 am.

**PREREQUISITES:**
Medicine

**AVAILABLE TO EXTERNALS:**
yes

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

**DURATION:**
4 weeks

**1998-99 ELECTIVES BEGIN WEEKS:**
1, 5, 9, 13, 17, 21, 25, 29, 33, 37.

**LEARNING OBJECTIVES (in order of importance):**
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of COPD, lung cancer, pulmonary embolism, pneumonia, and dyspnea.
3. Interpretation of pulmonary function tests, exercise studies, and arterial blood gases.
4. Reading x-rays.
5. Basic science foundation of pathophysiologic mechanisms.
6. Diagnosis and management of complex in-patient problems.
7. Library research and interpretation of literature.
8. Oral presentations of clinical cases.

**DESCRIPTION:**

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**
1. Chronic bronchitis and/or emphysema
2. Pneumonia
3. Lung cancer
4. Asthma
5. Infection in the immunocomprised host
6. Unexplained dyspnea
7. Interstitial lung disease
8. Respiratory insufficiency

**INPATIENT:** 90%

**OUTPATIENT:** 10%

**CONSULTATION:** 100%

**PRIMARY CARE:** 0%

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

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 14

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** 45

**TYPICAL WEEKLY SCHEDULE**

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</table>
| AM   | 8:00 - 9:00 Physiology conference  
10:00 - 12:00 Attending rounds | 8:00 - 9:00 Clinical case presentation | 8:00 - 9:00 Pulmonary grand rounds  
10:00 - 12:00 Attending rounds | 8:00 - 9:00 Pulmonary Med/Surg conference  
9:00 - 11:00 Pulmonary clinic | 8:30 - 9:30 Medical grand rounds  
10:00 - 12:00 Attending rounds |
| PM   | 12:00 - 1:00 Journal club  
1:00 - 2:00 Critical care series | | 1:00 - 2:00 Radiology conf. | 12:00 - 1:00 Pathology conf. | 1:30 - 2:30 Pulmonary Function Tutorial |

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:**

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**
Advanced Clinical Clerkship  
LOCATION: CHS  
1998-99

COURSE CHAIR:  
Christopher Cooper, M.D.  
PHONE #:  
(310)-825-5988

SUPPORTING FACULTY:  
Full-time Pulmonary Faculty, CHS

STUDENT COORDINATOR:  
Anita Saenz  
PHONE #:  
(310)-825-5988

REPORT TO:  
Dr. Cooper 37-131 CHS (Pulmonary Division Office).

PREREQUISITES:  
Medicine and Surgery Clerkships

AVAILABLE TO EXTERNS:  
yes

STUDENTS / PERIOD:  
max 2 min 1

DURATION:  
2.4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
1, 3, 5, 7, 9, 11, 13, 15, 17, 21, 23, 25, 27, 29, 31, 33, 37, 39, 41, 43, 45, 47, 49, 51

LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis, natural history, evaluation and management of COPD, asthma, pneumonias, respiratory failure, lung cancer, etc.

2. Interpretation of arterial blood gases, pulmonary function tests, chest radiographs, etc.

3. Medical judgment, analysis of medical data and synthesis of information into a coherent management plan.

4. Knowledge of the clinical pharmacology of bronchodilators, corticosteroids, oxygen, etc.

5. Knowledge of the usefulness of bronchoscopy, needle aspiration, open-lung biopsy, thoracentesis, mechanical ventilators, etc.

6. Improving the doctor - patient relationship

7. Appreciation and insight into the relationship of the consultant to primary care physicians and their patients.

8. Outcomes of health care (e.g., compliance, patient satisfaction).

9. Cost effectiveness

10. Oral presentations

DESCRIPTION:  
The student will gain first-hand knowledge about how pulmonary internists deliver primary and consultative care to ambulatory and hospitalized patients, including financial and psychological aspects. The students will observe and/or assist the preceptor in his everyday practice of medicine at his office and/or hospital.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Chronic bronchitis, emphysema, asthma
2. Pneumonia, incl. TB
3. Lung cancer/lung nodule
4. Acute respiratory failure
5. Pulmonary edema
6. Pulmonary embolism
7. Interstitial lung disease
8. Pre- and post-op evaluations

INPATIENT: 40%  
OUTPATIENT: 60%  
CONSULTATION: 40%  
PRIMARY CARE: 60%

CLOSE CONTACT WITH:  
X FULL TIME FACULTY  
CLINICAL FACULTY

FELLOWS

RESIDENTS

INTERNS

OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 50

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

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  
No night call responsibilities required. Week-end rounds are optional.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  
The student is encouraged to attend scheduled bronchoscopies and other pulmonary procedures, including pulmonary function tests and cardiopulmonary exercise tests.
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis, natural history, differential diagnosis, evaluation, and management of COPD, asthma, lung neoplasms, pneumonias, and pulmonary embolism, etc.
2. Medical judgment, analysis of medical data, and synthesis of information into a coherent management plan
3. Interpretation of pulmonary function tests, arterial blood gases, chest x-rays, serological and pleural fluid data, etc.
4. Understanding basic mechanisms of hypoxemia, hypercarbia, restrictive and obstructive ventilatory patterns, dyspnea and response of lung to injury, etc.
5. Understanding the indications, limitations, and contraindications of fiberoptic bronchoscopy, fine needle aspiration, open-lung biopsy, thoracentesis, and the use of mechanical ventilators, etc.
6. Knowledge of the clinical pharmacology of theophylline, sympathominerics, corticosteroids, oxygen, and antimicrobials, etc.
7. Oral presentations.
9. Library research and interpretation of literature.
10. Learning to interact with primary care physicians as a team member.

DESCRIPTION:
The elective provides a broad exposure to pulmonary problems and diseases, their diagnostic evaluation, and management, both in the inpatient and outpatient setting. The student will evaluate and follow patients under the supervision of the pulmonary consult attending. The student participates in weekly clinical conferences of the Pulmonary Division and presents brief teaching summaries in conferences as well as during rounds.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Chronic bronchitis, emphysema, asthma
2. Lung neoplasms/pulmonary nodules
3. Pneumonia, incl. TB
4. Pulmonary infiltrates in immunosupp. pts.
5. Pleural effusion
6. Interstitial lung disease, incl. sarcoidosis
7. Pulmonary embolism
8. Pre- and post-op evaluations

INPATIENT: 60%
OUTPATIENT: 40%
CONSULTATION: 60%
PRIMARY CARE: 40%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Radiologist

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 50
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Night or week-end call responsibilities are not expected of the student. However, the student is invited to attend week-end consult rounds.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The student is encouraged to attend scheduled bronchoscopies and other pulmonary procedures, including pulmonary function tests and cardiopulmonary exercise tests.
Advanced Clinical Clerkship  Location: S.BARBARA  1998-99

COURSE CHAIR:  PHONE #:  
Robert S. Wright, M.D.  (805)-681-7630

LEARNING OBJECTIVES (in order of importance)
1. Approach to patient with life-threatening problems such as sepsis, acute respiratory failure, and ARDS.
2. Understanding of the pathophysiology of multisystem organ failure, sepsis, ARDS.
3. Indications for hemodynamic monitoring.
4. Management of Asthma and COPD.
5. Working knowledge of pulmonary function testing and exercise testing.
6. Approach to patient with pneumonia.
8. Indications and complication of bronchoscopy.
10. Introduction to ethical issues regarding life-support technology.
11. Delivery of succinct, well-written, and dictated consultation notes.

SUPPORTING FACULTY:
Myron I. Liebhaber, M.D., Jeffrey L. Kupperman, M.D.

STUDENT COORDINATOR:  PHONE #:  
Robert S. Wright, M.D.  (805)-681-7630

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. COPD
2. Acute respiratory failure
3. Asthma
4. Lung masses and nodules
5. Pneumonia
6. Chronic cough
7. Chest pain
8. Dyspnea

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

INPATIENT:  60%  OUTPATIENT:  40%
CONSULTATION:  60%  PRIMARY CARE:  40%

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  200

TYPICAL WEEKLY SCHEDULE

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<td>Independent study</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Santa Barbara Cottage Hospital is a USC affiliated hospital with a residency program in internal medicine, surgery, and radiology. *Free housing offered but must be arranged in advance.
*Students must get approval from course chairman in advance.

177
Advanced Clinical Clerkship

Location: HARBOR

1998-99

COURSE CHAIR: 
Gregory M. Mason, M.D.  
PHONE #:  
(310)-222-2413

SUPPORTING FACULTY:  
Respiratory Division Faculty

STUDENT COORDINATOR: 
Louella Urasaki  
PHONE #:  
(310)-222-2413

REPORT TO:  
Louella Urasaki, Main Building Hospital Basement (B-255), 8:30 am.

PREREQUISITES: 
Medicine and Surgery

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  
max 1 min 0

DURATION:  
4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

DESCRIPTION:  
This elective is structured around a busy consultation service which is staffed by 2 pulmonary fellows, a medical resident, and attending. The integration of medical, surgical, radiologic, pathologic, and physiologic features of lung disease is stressed at a weekly interdisciplinary Chest Conference staffed by faculty from these disciplines. The TB Conference addresses practical and theoretic issues in the current management of TB, MDR-TB with and without HIV infection.

LEARNING OBJECTIVES (in order of importance)

1. Integration of pulmonary physiology, radiology, and clinical decision-making.
2. Understanding of the approach to the patient with acute or chronic dyspnea and acute and chronic respiratory failure.
3. Understanding of bronchoscopic and pathologic features in neoplastic and interstitial lung disease.
4. Diagnosis and management of the compromised host with suspected lung infection.
5. Evaluation of sleep apnea.
6. Approach to pulmonary complications of AIDS.
7. Controversies in asthma pathophysiology and treatment.

LEARNING OBJECTIVES

COMMON PROBLEMS/DISEASES  
1. Dyspnea evaluation  
2. The problem asthmatic  
3. Approach to pneumonia  
4. Fever and HIV infection  
5. Management of hemoptysis  
6. Post-operative complication  
7. Adult respiratory distress syndrome  
8. Tuberculosis/lung cancer

INPATIENT:  
90%  
OUTPATIENT:  
10%

CONSULTATION:  
100%

PRIMARY CARE:  
0%

CLOSE CONTACT WITH:

X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Allied health personnel

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  
10

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  
50-60

TYPICAL WEEKLY SCHEDULE

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| AM   | 12:15 - 1:00 Physiology conference (PFT, etc.)  
12:15-1:00 Chest X-ray conference (3rd Tuesday/month)  
8:30 - 9:30 Medical grand rounds  
11:30 - 1:00 Medical chest conference  
11:30 - 1:00 Chest/infectious disease conference (1st Wednesday/month)  
12:00 - 1:00 Consult rounds  
1:00 - 2:00 Consult rounds  
12:00 - 1:00 Medical management conference  
1:00 - 2:30 Consult rounds  
1:00 - 2:30 Consult rounds  
1:00 - 2:30 Consult rounds  
1:00 - 2:30 Consult rounds  | 1:00 - 2:00 TB Conf.  
2:00 - 3:00 Consult rounds  
4:00 - 5:30 Interdisciplinary chest conference  
1:00 - 2:00 Consult rounds  
12:00 - 1:00 Medical management conference  
1:00 - 5:00 Consult rounds  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  |
| PM   | 1:00 - 3:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:30 Interdisciplinary chest conference  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  | 1:00 - 2:00 Consult rounds  
4:00 - 5:00 Special lecture series  |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis, natural history, differential diagnosis, orderly investigation, and management of certain disease processes as listed under “major problems” below.
2. Clinical skills, medical interviewing, and physical examination, particularly joint examination technique.
3. Medical decision making, analysis of medical data, and synthesis of information.
4. Diagnosis and management of complex in-patient problems.
5. Interpretation of rheumatological and immunological tests.
6. Oral presentation of clinical cases.
7. The knowledge of the pharmacology and clinical uses of non-steroidal anti-inflammatory drugs, gold, penicillamine, antimalarias, immunsuppressives (cytoxan, immuran), corticosteroids, and uricosuric agents.
8. Medical record keeping (e.g., data collection and recording appropriate format for writing consultations).
9. The techniques of joint and soft tissue injections; special skills such as the reading of X-ray joints; crystal examination using polarizing microscope; examination of joint fluid and the aspiration of joint effusions.

DESCRIPTION: The student will learn the techniques of joint examination, clinical features, diagnosis, and management of rheumatic diseases. Teaching includes direct patient contact through inpatient consultations, the ambulatory clinics, and the rehabilitation service. Radiologic and immunologic aspects of rheumatic diseases will be emphasized.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Rheumatoid arthritis
2. SLE
3. Systemic vasculitis
4. Other collagenous vascular diseases
5. Osteoarthritis
6. Crystal-induced arthritis
7. Rheumatoid variants
8. Septic arthritis

INPATIENT: 90%
OUTPATIENT: 10%
CONSULTATION: 90%
PRIMARY CARE: 10%
CLOSE CONTACT WITH:
- FULL TIME FACULTY
- CLINICAL FACULTY
- FELLOWS
- RESIDENTS
- INTERNS
- OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 90

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 Attending rounds</td>
<td>9:00 V.A. clinic</td>
<td>8:00 All. X-ray conf.</td>
<td>9:00 Attending rounds</td>
<td>8:30 - 9:30 Medical grand rounds</td>
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<td></td>
<td>11:00 Pathology conference</td>
<td>UCLA clinic</td>
<td>or Rheum. conf.</td>
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<td>11:00 Chief of Rheum rounds Dr. Klinenberg</td>
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<td>(once a month)</td>
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<td>9:00 CSMC clinic</td>
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<td>PM</td>
<td>1:00 Inpatients rounds</td>
<td>1:00 Inpatients rounds</td>
<td>1:00 Inpatients rounds</td>
<td>1:00 Inpatients rounds</td>
<td>1:00 Inpatients rounds</td>
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<td>4:00 UCLA grand rounds</td>
<td>followed by slides</td>
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<td>(Rheumatology)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME275.02 RHEUMATOLOGY

Advanced Clinical Clerkship  Location: HARBOR  1998-99

COURSE CHAIR:  PHONE #:  
James S. Louie, M.D.  (310)-222-3697

SUPPORTING FACULTY:
Michael R. Liebling, M.D.

STUDENT COORDINATOR:  PHONE #:
Renee Mendes  (310)-222-3697

REPORT TO:  Rheumatology Fellow, E2-South, Harbor-UCLA Medical Center.

PREREQUISITES:  Medicine and Surgery; Radiology Preferred

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  4 weeks


DESCRIPTION:  Supervision and small-group teaching is provided by medical residents, subspecialty fellows, and the staff. Students evaluate and follow 3 to 4 in-patients for presentation to the attending staff during consultation rounds two times a week. In out-patient clinics, students present to the staff, 12-20 patients per week. Didactic lectures by invited speakers and staff complete the program.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of common rheumatic and immune diseases, including rheumatoid arthritis, degenerative joint disease, systemic lupus erythematosus.
2. Improved abilities in history-taking and physical examination.
3. Maturing medical judgment, analysis of data obtained from many sources, including such special skills as interpretation of serologic studies, joint fluid analysis with polarizing microscopy, and interpretation of x rays of bones and joints.
4. Knowledge of drugs, including anti-inflammatory, steroidal immunosuppressive, and immunomodulatory compounds.
5. Knowledge about autoantibodies, complement and mediators of inflammation.
6. Experience with ambulatory care of chronic illnesses

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Rheumatoid Arthritis
2. Systemic Lupus Erythematosus
3. Degenerative Joint Disease
4. Vasculitis
5. Reiter’s Syndrome
6. Infectious Arthritis

INPATIENT:  25%  CLOSE CONTACT WITH:
OUTPATIENT:  75%  X  FULL TIME FACULTY
CONSULTATION:  25%  X  CLINICAL FACULTY
PRIMARY CARE:  75%  X  FELLOWS
                   X  RESIDENTS
                   X  INTERNS
                   X  OTHER: Nurse Specialists

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  300

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:30 - 9:20 Rheumatology Journal Club</td>
<td>8:30 – 10:00 Medical Grand Rounds</td>
<td>7:30 Allergy &amp; Immunology Conference</td>
<td>8:00 – 12:00 Lupus/RA Clinic</td>
<td>Rheumatology Attending Rounds</td>
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<td>9:30 10:30 Staff Lecture</td>
<td>10:00 – 12:00 Consult Rounds</td>
<td>11:00 – 12:00 Radiology Didactic</td>
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<td>PM</td>
<td>Consults Rheumatology Slide Collection</td>
<td>1:00 - 5:00 General Arthritis Clinic</td>
<td>Consults Independent Study</td>
<td>Consult Rounds</td>
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<td>4:00:00 Rheumatology Grand Rounds at UCLA</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Combined electives with Allergy-Immunology include clinic experience - AIDS clinics, Monday afternoons and Wednesday mornings.
ME275.03 RHEUMATOLOGY

Advanced Clinical Clerkship Location: SVA 1998-99

COURSE CHAIR: PHONE #: Richard Weisbart, M.D. (818)-895-9384

SUPPORTING FACULTY: Members of the Rheumatology and Rehabilitation Medicine Divisions; Pvt. Attendings

STUDENT COORDINATOR: PHONE #: Marianne Kimmerle (818)-895-9394

REPORT TO: Marianne Kimmerle, Bldg. 200, Room 3424 8:30 am.

PREREQUISITES: Medicine, Surgery

AVAILABLE TO EXTERNALS: yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 1,5,9,13,17,21,25,29,33,37,41,45,49.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history of inflammatory and non-inflammatory arthritides, vasculitides, and soft tissue disorders.
2. Clinical skills: perfection of the rheumatologic examination.
3. Medical decision making: Analysis of serological tests and application to patient management.
4. Medical record keeping: concise data accumulation and interpretation.
5. Diagnosis and management of complex in-patient problems.
6. Practical, cost effective assessment and management of common disorders.
7. Interpretation of current literature.
8. Methods of effective case presentations and the communication of information.

DESCRIPTION: Rheumatologic complaints comprise a major segment of private practice. An approach to the diagnosis and management of common problems will be emphasized in this course.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Rheumatoid arthritis
2. Soft tissue diseases
3. Gout
4. Degenerative arthrosis
5. Infectious arthritis
6. Spondyloarthropathies
7. Vasculitis

INPATIENT: 40%  OUTPATIENT: 60%  CONSULTATION: 70%  PRIMARY CARE: 30%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 24
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 480

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>Immunology Journal Club @ SVA</td>
<td>Rheumatology Cytotoxicity Clinic @ SVA</td>
<td>Inpatient Ward Rounds @ OVMC</td>
<td>Medicine Grand Rounds @ SVA</td>
<td>Rheumatology Clinic @ OVMC</td>
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<td>ACR Slide Collection Review</td>
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<td>PM</td>
<td>Rheumatology Grand Rounds @ UCLA</td>
<td>Basic Science &amp; Clinical Conference</td>
<td>Inpatient Consults @ OVMC</td>
<td>Musculoskeletal clinic @ SVA</td>
<td>Inpatient Ward Rounds @ OVMC</td>
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<td>Radiology Conference @ OVMC</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

181
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis, and management of autoimmune collagen diseases and arthritis.
2. The knowledge of the pharmacology of aspirin, non-steroidal anti-inflammatory drugs, gold, penicillamine and corticosteroids and cytotoxics.
3. Medical interviewing and physical examination of muscles, joints and all rheumatic disease manifestations (skin, neurologic, etc.).
4. Analysis of medical data and synthesis of information regarding autoimmune and rheumatic diseases, including both simple and complex diagnostic problems.
5. Interpretation of serologic studies for SLE, RA, etc.
7. Written and dictated rheumatology consultations.
8. Procedures such as: joint aspiration and injection.

DEPARTMENT: Clinical Rheumatology

LEARNING OBJECTIVES:
1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis, and management of autoimmune collagen diseases and arthritis.
2. The knowledge of the pharmacology of aspirin, non-steroidal anti-inflammatory drugs, gold, penicillamine and corticosteroids and cytotoxics.
3. Medical interviewing and physical examination of muscles, joints and all rheumatic disease manifestations (skin, neurologic, etc.).
4. Analysis of medical data and synthesis of information regarding autoimmune and rheumatic diseases, including both simple and complex diagnostic problems.
5. Interpretation of serologic studies for SLE, RA, etc.
7. Written and dictated rheumatology consultations.
8. Procedures such as: joint aspiration and injection.

DESCRIPTION: Students will be taught methods of rheumatologic diagnosis and treatment in both inpatient and outpatient settings, utilizing patients of the division of rheumatology in the UCLA Hospital wards, clinics, and DMGP. Education in the role of genetics and the immune system in autoimmunity is offered in 4 weekly conferences.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. RA
2. SLE/Vasculitis
3. Osteoarthritis
4. Dermatomyositis/Scleroderma
5. Gout
6. Retire’s Syndrome
7. Psoriatic Arthritis
8. Osteoporosis

INPATIENT: 30%
OUTPATIENT: 70%
CONSULTATION: 80%
PRIMARY CARE: 20%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
CLINICAL FACULTY
X FELLOWS
RESIDENTS
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 300

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>Rheumatology Clinic 200 Medical Plaza</td>
<td>Basic Science Journal club</td>
<td>Medical grand rounds Rheumatology Clinic Noon Rheumatology Grand Rounds</td>
<td>Inpatient Evaluations or Rheumatology Clinic</td>
<td>8:30 Clinical Journal Club or Research Conf. 9:30 Rheumatology Clinic In-patient evaluations and Independent study</td>
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<td>Immunology Forum Didactic review Attending rounds</td>
<td>Rheumatology Clinic</td>
<td>Attending rounds</td>
<td>Didactic review Attending rounds</td>
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<tr>
<td>PM</td>
<td>Immunology Forum Didactic review Attending rounds</td>
<td>Rheumatology Clinic</td>
<td>Attending rounds</td>
<td>Didactic review Attending rounds Independent study</td>
<td>Attending rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
Advanced Clinical Clerkship

Location: SVA

1998-99

COURSE CHAIR: Marvin B. Cohen, M.D. (818)-895-9332

SUPPORTING FACULTY: R. Lake, M.D., L.S., Graham, Ph.D., L. Yamada, Pharm D.

STUDENT COORDINATOR: Marvin B. Cohen, M.D. (818)-895-9332

REPORT TO: Radiation Safety Officer, VAS, Bldg.200 NUCL. MED.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 2 weeks

1998-99 ELECTIVES BEGIN WEEKS: 7, 11, 17, 21, 31, 37, 43

DESCRIPTION: This elective provides an excellent opportunity to learn the principle and clinical applications of this multidisciplinary field. Observation of all aspects of Nuclear Medicine, attendance at departmental and interdepartmental clinics and conferences, hands-on experience with imaging equipment and computers.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the component parts and basic principles of Nuclear Medicine with emphasis on diagnostic clinical applications.
2. Clinical interpretation of imaging studies including brain, thyroid, lung, heart, liver, gallbladder, spleen, kidney, clot localization, abscess, and tumor detection.
4. Basic physics of radiation, scintillation counting, and imaging plus recent developments in instrumentation.
5. Principles of radioimmunoassay including sensitivity, specificity, dose response curve, production, and assay of antisera, separation of free and bound, clinical applications.
7. Principles of computers, programming, and clinical applications with emphasis on cardiovascular Nuclear Medicine.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Tumor detection
2. Coronary Artery Disease
3. Pulmonary Emboli
4. Thyroid Disease
5. Ventricular - Function
6. Biliary Disease
7. Abscess Detection
8. Osteomyelitis

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

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X OTHER Physicist, Radiopharmacist, Radiation Safety Officer, Chief Technologist

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 40
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 110

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9 - 10 ROUNDS</td>
<td>8:30 - 10:00</td>
<td>9 - 10 Nuclear Medicine Physics Lecture</td>
<td>8:30 - 10:00</td>
<td>9 - 10 Computer Lab</td>
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<td>Radiation Safety Officer</td>
<td>Radiopharmacy</td>
<td>Medicine Clinic</td>
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<td>10 - 12 Nuclear Medical Clinic</td>
<td>10 - 12 Nuclear Medicine Clinic</td>
<td>10:30 - 12:00 Nuclear Medicine Clinic</td>
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<td>PM</td>
<td>1 - 2 Radiation Safety Lecture</td>
<td>1 - 2 Clinical Lecture</td>
<td>1 - 2 Computer Application Lecture</td>
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<td>2 - 4 Nuclear Medicine Clinic</td>
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<td>4 - 5 Imaging Interpretation and Dictation of Studies</td>
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<td>1 - 2 Clinical Lecture</td>
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<td>2 - 4 Nuclear Medicine Clinic</td>
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<td>4 - 5 Imaging Interpretation and Dictation of Studies</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Clerkship includes multiple special lectures to give student a comprehensive overview of Nuclear Medicine.
COURSE CHAIR: Shalender Bhasin, M.D.  
(213) 563-9353

SUPPORTING FACULTY: B. Salahian, M.D.,  
F. Charles, M.D., Medicine; M. Parikh, M.D., Nuclear Med.;  
M. Spieth, M.D., B. Suh, Reproductive Endocrinology

STUDENT COORDINATOR: Cora Kikunaga  
(213) 563-9353

COURSE OBJECTIVES (in order of importance)
1. Pathophysiological basis of endocrine disorders  
2. Medical judgment, analysis of medical data based on evidence, and synthesis of information  
3. Interpretation of tests in endocrinology  
4. Knowledge of endocrine drugs  
5. Diagnosis and management of complex endocrine problems  
6. Algorithmic approach to the work-up of endocrine patients

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: No

STUDENTS / PERIOD: max 3 min 1

DURATION: 4 - 6 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
By Arrangement

DESCRIPTION: The elective provides a comprehensive inpatient and ambulatory experience and training in the pathophysiology and management of clinical disorders in Endocrinology, Metabolism and Molecular Medicine. The course provides opportunities for inpatient consultation and management of ambulatory patients in Endocrinology and Diabetes Clinics. There is substantial emphasis on basic science, molecular genetics, and pathophysiology. The students attend two half-day clinics (Pediatric Endocrinology and Adult Endocrinology) and 4 - 5 regularly scheduled weekly conferences.

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:00  Follow-up old Consults  
9:00  Endocrine Morning Report  
Research Conference  
10:00 Attending Rounds  |
|      | 8:00  Follow-up Consults  
9:00  Morning Report  
10:00 Attending Rounds  
11:00 Medical Grand Rounds  |
|      | 8:00  Follow-up old Consults  
9:00  Morning Report  
10:00 Attending Rounds  
11:00 Reproductive Endocrinology Clinic  |
|      | 8:00  Follow-up Consults  
9:00  Endocrine Journal Club  
AFH  |
|      | 8:00  Follow-up old Consults  
9:00  Morning Report  
10:00 Attending Rounds |
| PM   | 12:00  Basic Science Conference  
1:00 Diabetes Clinic |
|      | 2:00  Pediatric Endocrinology Clinic  
4:00 Peds OPD |
|      | 1:00  Adult Endocrinology & Diabetes Clinics (Please be prompt) |
|      | 1:30  Endocrine Clinical Conference B-027-N |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Increase knowledge of various hepatological diseases such as viral hepatitis, alcoholic liver disease, autoimmune hepatitis, cholestatic liver disease, and hepatic failure
2. Evaluation of patients for liver transplantation
3. Complete history and physical examination in patients with liver disease
4. Basic science knowledge pertaining to hepatobiliary pathophysiology
5. Interpretation of liver tests in the serum
6. Procedures: Paracentesis, liver biopsy
7. Ability to do literature searches on topics re patient care
8. Pathological interpretation of liver biopsies
9. Radiological interpretation of the liver with ultrasound, CT scan, MRI, and ERCP
10. Medical record keeping (data collection, recording, and consultations).

DESCRIPTION: The hepatology and liver transplantation programs at CSMC are consultative services for the entire hospital. We evaluate a wide range of liver diseases and determine which patients require liver transplantation. Emphasis will be on history and physical examination with subsequent differential diagnosis and treatment. We have an extensive library and filing system for all hepatology subjects.

COMMON PROBLEMS/DISEASES
1. Jaundice
2. Abnormal liver tests
3. Mass in the liver
4. Viral hepatitis
5. Toxin-induced liver disease
6. Alcoholic liver disease
7. Fulminant hepatic failure
8. Cholestatic liver disease

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 70%
PRIMARY CARE: 30%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X FELLOWS
X INTERNS
OTHER

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Optional participation for weekend rounds and emergency admissions

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: While on the hepatology rotation, the student will be under the supervision of the Hepatology fellow. The student will present his cases to the full-time staff, fellows, and residents. The student will be expected to follow the patients and participate in the diagnostic and therapeutic plans regarding their patients. * Ward consults and teaching goes on throughout the day. Additional rounds are done "prn".
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history of common internal medicine illnesses.
2. Understanding of thought processes involved in differential diagnosis and decision making.
3. Understanding of how a general internist functions in the real world.
4. Development of understanding of how social needs of patients interact with a developed care plan.
5. Appreciation of interactions of the entire medical team in managing patients.
6. Preventative medicine

DESCRIPTION: This is designed to allow students maximum flexibility in developing a course that will teach the functioning of a general internist in the real world. Any combination of experiences is available: ambulatory care at satellite clinic or county hospital and inpatient care at a county hospital. The Course Chair will work with each student individually to develop a program to meet the student's needs.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Preventative medicine & health maintenance
2. Acute & chronic heart disease
3. Diabetes
4. Acute & chronic respiratory diseases
5. Acute & chronic musculoskeletal problems
6. Acute & chronic abdominal pain
7. Neurological disorders
8. Acute & chronic career manifestations

INPATIENT:  50%  
OUTPATIENT:  50%  
CONSULTATION: %  
PRIMARY CARE:  100%  
CLOSE CONTACT WITH:  
X  FULL TIME FACULTY  
X  CLINICAL FACULTY  
FELLOWS  
RESIDENTS  
INTERNS  
OTHER  

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  
OP 160; IP 30

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  
OP 2,100; IP 200

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  
Outpatient: none. Inpatient: call every 5th night (until 10:00).

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  
Students see patients first and decide appropriate management of care before reviewing with faculty. Time in subspecialty clinics to learn how internists manage these problems is possible. Housing provided. Transportation possible. *Weeks are flexible, #Percentages are flexible, inpatient never to exceed 85%.
LEARNING OBJECTIVES (in order of importance)
2. Clinical skills: medical interviewing, physical exam (especially neuro and musculoskeletal), clinical judgment, efficient time management, pharmacology, and local injections.
3. Cost effective use of preventive screening.
4. Interpretation of routine X-rays.
5. Practical cost-effective assessment and management of common medical disorders.
6. How to interface and work closely with an interdisciplinary team.

DESCRIPTION: This elective is designed to provide the student with a stimulating ambulatory care and private office-like experience. The student will have his or her own consultation and examining room and determine his or her own scheduling and patient load. The student will have the opportunity to work closely with a variety of subspecialty and General Internal Medicine Faculty and will be able to individually structure his or her clinic schedule from the full range of medical specialty clinics in addition to ambulatory care walk-in/urgent care clinics (see typical weekly schedule).

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Acute infectious disease
2. Respiratory diseases; asthma
3. Cardiovascular diseases & diabetes
4. Musculoskeletal disorders
5. Acute chest & abdominal pain
6. Dermatologic disorders
7. Soft tissue trauma: Fractures, lacerations
8. Psychosomatic disorders

INPATIENT: 0%
OUTPATIENT: 100%
CONSULTATION: 40%
PRIMARY CARE: 60%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER P.A./N.P.

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 150
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 10,000

TYPICAL WEEKLY SCHEDULE

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<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 Morning report General Medicine Clinic</td>
<td>8:00 Morning report Rheum Clinic</td>
<td>8:00 Morning report Signoid Clinic General Medicine Clinic</td>
<td>Behavioral Medicine Cardiology Clinic</td>
<td>8:00 Morning report General Medicine Clinic</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 Noon lecture General Medicine Clinic</td>
<td>12:00 Noon lecture Dermatology clinic Women’s clinic</td>
<td>12:00 Conference General Medicine Clinic</td>
<td>12:00 Noon lecture Urgent care</td>
<td>12:00 Noon lecture General Medicine Clinic</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. To increase skills in assessment of the older patient.
2. To learn principles of interdisciplinary team approach.
3. To learn to evaluate and manage older persons in hospital ambulatory subacute rehabilitation and long-term settings.
4. To increase knowledge of diseases and syndromes that are common in clinical geriatrics.
5. To improve efficiency in patient evaluation follow-up and management.
6. To learn how psycho-social and ethical issues bear on medical illnesses of the older patient.

DESCRIPTION: In this elective, we attempt to increase the senior medical student's skills in caring for elderly patients in a variety of environments including ambulatory, subacute rehabilitation, and long-term care as well as hospital settings. The elective seeks to increase the student's knowledge and assessment skills of elderly patients through clinical experience and close faculty supervision.

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Multisystem disease
2. Delirium
3. Immobility
4. Hip fracture
5. Stroke
6. Poor nutrition
7. Dementia/depression
8. Deteriorating functional status

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>Weeks 1-2 Inpatient Round/Lectures. Interdisciplinary Conferences Weeks 3-4 Nursing Home Rounds</td>
<td>Weeks 1-2 Inpatient Round/Lectures. Interdisciplinary Conferences Weeks 3-4 Nursing Home Rounds</td>
<td>Weeks 1-2 Inpatient Round/Lectures. Interdisciplinary Conferences Weeks 3-4 Nursing Home Rounds</td>
<td>Weeks 1-2 Inpatient Round/Lectures. Interdisciplinary Conferences Weeks 3-4 Nursing Home Rounds</td>
<td>Weeks 1-2 Inpatient Round/Lectures. Interdisciplinary Conferences Weeks 3-4 Nursing Home Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>Weeks 1-2 New Hospital admissions, Home visits, outpatient Visits Weeks 3-4 General Psychiatry Consults</td>
<td>Weeks 1-2 New Hospital admissions, Home visits, outpatient Visits Weeks 3-4 General Psychiatry Consults</td>
<td>Weeks 1-2 New Hospital admissions, Home visits, outpatient Visits Weeks 3-4 General Psychiatry Consults</td>
<td>Weeks 1-2 New Hospital admissions, Home visits, outpatient Visits Weeks 3-4 General Psychiatry Consults</td>
<td>Weeks 1-2 New Hospital admissions, Home visits, outpatient Visits Weeks 3-4 General Psychiatry Consults</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Orientation will occur with Dr. James Davis at 1:00 p.m. : IMS Suite. Geriatric patients account for large share of inpatient and outpatient medical and surgical practices. Students who plan careers in any adult surgical or medical specialty will perform better if they have learned effective ways of managing geriatric patients.
LEARNING OBJECTIVES (in order of importance)

2. Knowledge of the pathogenesis, natural history, differential diagnosis, evaluation and management of common diseases and disorders in the elderly.
3. Knowledge of pharmacology in developing therapeutic regimens for the elderly.
4. Clinical skills: improving medical interviewing and physical examination with emphasis on functional assessment and approaches to assessing the elderly patient.
5. Medical decision making: emphasis on altered presentation of disease, multiple illness, patient’s lifestyle, cost-benefit factor, and rehabilitative potential.
6. Improving doctor-patient relationship, communication skills, and interaction with the elderly patient.
7. Interpretation of tests: appreciation of normal parameters with aging and cost-effective use of diagnostic interventions.
8. Understanding societal and personal attitudes toward aging and the elderly and developing a positive and humanistic approach to the care of the older individual.
9. Becoming familiar with workup and management of common problems of geriatric patients and nursing home settings.

DESCRIPTION:
The multi-campus Division of Geriatrics & Gerontology which encompasses SVA, WVA, UCLA, & Jewish Home for the Aging is the largest geriatric program in the world. The SVA campus offers a variety of settings to learn geriatric medicine: Geriatric Specialty Clinics, Hospital Consult Service, Academic Nursing Home, and Hospital Based Home Care. Students will be assigned primary care responsibilities while attending geriatric clinics and ED conferences. The Academic Nursing Home (ANH) at Sepulveda is a model long term care ward, incorporating interdisciplinary team assessment and management principles to provide and enhance health care for the elderly.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Dementia
2. Affective disorder
3. Stroke rehabilitation
4. Falls, gait, and balance
5. Urinary tract problems
6. Congestive heart failure
7. Diabetes
8. Hypertension

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 10%
PRIMARY CARE: 90%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Allied health personnel
(Physician’s asssts., geriatric social worker, public health nurse, play psychologists, and psychiatrists)

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 8-12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 200-300

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>9:00 Work rounds (Nursing Home)</td>
<td>9:00 Home Care Interdisciplinary team meeting</td>
<td>9:00 Work rounds (Nursing home)</td>
<td>9:00 Medical grand rounds</td>
<td>9:00 Work rounds (Nursing Home)</td>
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<td>10:00 Attending rounds (Nursing Home)</td>
<td>Medical conference</td>
<td>10:00 Attending rounds (Nursing Home)</td>
<td>Home Visits</td>
<td>10:00 Attending rounds (Nursing Home)</td>
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<tr>
<td></td>
<td>12:00 Geriatric conf.</td>
<td></td>
<td>Medical conference</td>
<td></td>
<td>12:00 Medical conf.</td>
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<tr>
<td>PM</td>
<td>1:00 Gero-diabetes clinic</td>
<td>3:00 Multicampus lecture aging seminars</td>
<td>1:00 Geriatrics medical clinic</td>
<td>Home Visits</td>
<td>1:00 Interdisciplinary Team Training</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: There are no on-call responsibilities.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This facility provides learning opportunities in the ANH and multiple other settings to develop knowledge and skills in all areas of geriatric assessment and management including health status assessment, therapeutic, and rehab programs for elderly patients. Chronic illness is viewed from the perspective of “treatable disease” to improve overall functioning for elderly patients.
ME410.01 CARDIOLOGY

Subinternship\Inpatient Location: CHS 1998-99

COURSE CHAIR: PHONE #:
Janine Krivokapich, M.D. (310)-825-5280

SUPPORTING FACULTY:
Fogelman, Krivokapich, Fonarow, Middlefauff, Tillisch, Goldhaber, Weiss, Fyne

STUDENT COORDINATOR: PHONE #:
Suzie Lafranchi (310)-794-9736

REPORT TO:
Janine Krivokapich, M.D., Room 47-123 CHS, 9:00 am.

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

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
5, 9, 13, 17, 21, 25, 29, 33, 37, 41.

DESCRIPTION: Each student will spend 4 weeks as a sub-intern on the Cardiac Care Unit & will work up & participate in the management of patients under the guidance of the Resident & Attending Physician. Rounds will be made daily, including weekends. The students will be expected to present and discuss their cases and participate in the discussion of other cases. They will also participate in all Cardiology conferences. In most instances, students will be on call with the residents every 3rd or 4th night.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of pathogenesis and natural history; the orderly investigation, differential diagnosis, and management of coronary artery disease, valvular heart disease, and cardiomyopathies.
2. Knowledge of the pharmacology of lidocaine, digitalis, propranolol, quinidine, lasix, beta blockers, calcium channel blockers, nitroprusside, dobutamine, and dopamine.
3. Clinical skills: medical interviewing and physical examination.
4. Medical judgment, analysis of medical data, and synthesis of information.
5. Interpretation of EKGs and skill in interpreting data from Swan-Ganz catheters.
6. Development of an understanding of the principles, costs, and benefits and proper use of routine cardiac tests, such as echocardiograms, treadmill tests, and radionuclide scans.

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 16
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: >100

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00-9:30 CCU Core Lecture Series (Monday, Tuesday, Thursday, Friday) 9:30 - 11:30 CCU rounds</td>
<td>8:30-9:30 Grand Rounds 9:30 - 11:30 CCU rounds</td>
<td>9:00-9:30 CCU Core Lecture Series 9:30 - 11:30 CCU rounds</td>
<td>9:00-9:30 CCU Core Lecture Series 9:30 - 11:30 CCU rounds</td>
<td>9:00-9:30 CCU Core Lecture Series 9:30 - 11:30 CCU rounds</td>
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<tr>
<td>PM</td>
<td>CCU Patient care</td>
<td>CCU Patient care</td>
<td>CCU Patient care 1:00 - 4:00 Adult congenital heart disease clinic (optional)</td>
<td>12:00 Cardiology seminar</td>
<td>12:00 Cardiology seminar</td>
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<tr>
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<td>5:00 Adult Cath. Conf.</td>
<td>CCU Patient care</td>
<td>12:00 Cardiology seminar</td>
<td>CCU Patient care</td>
<td>CCU Patient care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students will have night call every third or fourth night with CCU Resident. Rounds from 9:30 - 11:30 a.m., 7 days a week.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:


**LEARNING OBJECTIVES (in order of importance)**

1. Knowledge of the timing and role of surgery for coronary and valvular heart disease.
2. History and physical examination of patients with coronary artery disease or valvular heart disease.
3. Evaluation of specialized cardiac tests that are of importance for patients being assessed for open-heart surgery. (CXR, EKG, echocardiograms, nuclear scintigrams, coronary angiograms, and cardiac catheterization data).
4. Medical judgment, analysis of medical data, and synthesis of information in the preoperative patient.
5. The care of patients in the early postoperative period, with emphasis on low cardiac outpatient state, palmonic insufficiency, tamponade, and arrhythmias.
6. Diagnosis and treatment of various arrhythmias.
8. Oral presentations.

**DESCRIPTION:**
This is an intensive care unit-based service that focuses on the medical management of the open heart surgery patient. Students also have the opportunity to observe and scrub in on cardiac surgery cases. This is a very practical rotation for students. They will benefit by a close association with full-time faculty, cardiology fellows, and cardiac surgeons throughout each day. The primary emphasis will be on hands-on patient care and procedures with in-depth consideration of physical findings and ancillary laboratory testing. Students attend two daily lectures on EKG interpretation and on general cardiology topics.

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**

1. Coronary artery disease
2. Valvular heart disease
3. Arrhythmias
4. Congestive heart failure
5. Anticoagulation
6. Sepsis, renal failure, pulmonary complications
7. Anemias
8. Drug interactions

**INPATIENT: 100%**

**OUTPATIENT: 0%**

**CONSULTATION: 0%**

**PRIMARY CARE: 100%**

**CLOSE CONTACT WITH:**

X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 20

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** 80

**TYPICAL WEEKLY SCHEDULE**

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<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 Work rounds on post open-heart surgery patients.</td>
<td>8:00 Arrhythmia Conf. 9:00 Cardiology Grand Rounds 10:00 Work rounds with attending and team.</td>
<td>8:00 Work rounds</td>
<td>8:00 Work rounds</td>
<td>8:00 Work rounds</td>
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<tr>
<td></td>
<td>10:00 Work rds w/ attending cardiologists, fellow and house staff.</td>
<td>10:00 Work rounds with attending and team.</td>
<td>10:00 Work rounds with attending team.</td>
<td>10:00 Work rounds with attending team.</td>
<td>10:30 Work rounds with attending and team.</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 EKG Lecture 1:00 Perform work-up and review data for next day’s surgical pt. 3:00 Cardiology Lecture.</td>
<td>12:00 EKG Lecture 1:00 Work-ups of next day’s pts 3:00 Cardiology Lecture.</td>
<td>12:00 EKG Lecture 1:00 Work-up pts 3:00 Cardiology Lecture.</td>
<td>12:00 EKG Lecture 1:00 Work-up pts 3:00 Cardiology Lecture.</td>
<td>12:00 EKG Lecture 1:00 Work-up pts 3:00 Cardiology Lecture.</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** No call or weekends.

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** In addition, x-rays, electrocardiograms, echocardiograms, and coronary angiograms are gone over in detail with the attending cardiologist to provide in-depth teaching for the entire team. If the student wishes, opportunities are amply available for exposure to ongoing research projects.
LEARNING OBJECTIVES (in order of importance)
1. To gain knowledge of the pathophysiology and treatment of common critical care conditions including GI Bleed, unstable angina, MI, DKA, respiratory failure, sepsis, congestive heart failure, shock, and pneumonia.
2. Learn uses of anti-arrhythmics, vasodilators, pressors.
3. Learn to interpret arterial blood gases, electrolytes, hemodynamic monitoring.
4. To gain procedure skills including arterial lines, central lines thoracentesis, paracentesis lumbar puncture.
5. To gain experience in managing patients on ventilators.

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Work rounds</td>
<td>8:00 - 9:00 Work rounds</td>
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<td>8:00 - 9:00 Work rounds</td>
<td>8:00 - 9:00 Work rounds</td>
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<td></td>
<td>9:00 - 10:00 Morning report</td>
<td>9:00 - 10:00 Morning report</td>
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<td>10:00 - 12:00 Attending rounds</td>
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<td>10:00 - 12:00 Attending rounds</td>
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<td>10:00 - 12:00 Attending rounds</td>
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<tr>
<td>PM</td>
<td>12:00 - 1:00 Medicine noon conference</td>
<td>12:00 - 1:00 Medicine noon conference</td>
<td>12:00 - 1:00 Medicine noon conference</td>
<td>12:00 - 1:00 Unit care lecture series</td>
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<td>1:00 Critical care unit</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The on-call will be Monday and Thursday in order that the student will work with different residents each week. During the weekend the student will only be expected to round on Saturday.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Learn how to evaluate patients with malignancies.
4. Evaluation and management of internal medicine problems in cancer patients.
5. Management of psychological aspects of neoplastic disorders.
7. Management of bone marrow transplant patients.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Breast cancer
2. Lung cancer
3. Sarcomas
4. Leukemia
5. Lymphoma
6. Multiple Myeloma
7. Neutropenic Fever
8. Stem Cell Transplantation

INPATIENT: 90%
OUTPATIENT: 10%
CONSULTATION: 0%
PRIMARY CARE: 100%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00-10:30 Work Rounds</td>
<td>8:00-9:00 -Heme. Onc Grand Rounds</td>
<td>8:00-10:30 Work Rounds</td>
<td>8:00-10:30 Work Rounds</td>
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<tr>
<td></td>
<td>12:00-1:00 Noon Conference</td>
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<td>8:30-9:30 Grand Rounds</td>
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<tr>
<td>PM</td>
<td>Work Rounds</td>
<td>Work Rounds</td>
<td>12:00 Heme/Onc Tumor Board</td>
<td>Work Rounds</td>
<td>Work Rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every other weekend.

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 90

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:00 am Intake rounds
      | 9:00 am Work rounds
      | 10:00 am Attending rounds | 8:00 am Intake rounds
      | 9:00 am Work rounds
      | 10:00 am Attending rounds | 8:00 am Intake rounds
      | 9:00 am Work rounds
      | 10:00 am Attending rounds | 8:00 am Intake rounds
      | 9:00 am Work rounds
      | 10:00 am Attending rounds | 12:00 Medicine conference
      | 12:00 Medicine conference |
| PM   | 12:00 Medicine conference
      | 1:00 - 6:00 Patient care activities | 12:00 Medicine conference
      | 1:00 - 6:00 Patient care activities | 12:00 Medicine conference
      | 1:00 - 6:00 Patient care activities | 12:00 Medicine conference
      | 1:00 - 6:00 Patient care activities |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The student will take night call in the hospital every 4th night, working w/ a house officer. In general, s/he will be assigned patients in rotation with the intern. Weekend night call will occur approximately twice a rotation.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)
1. Proficiency in history taking and physical examination.
2. Differential diagnosis of common presenting complaints.
4. Medical management of common problems.
5. Recognition and therapy of medical emergencies.
6. Indications and interpretations of commonly ordered tests.
7. Proficiency with medical procedures such as nasogastric tube placement, venipuncture, lumbar puncture, thoracentesis, paracentesis, etc.
8. Medical record keeping (e.g., data collection and recording, appropriate format for writing consultations).
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, resident, one intern, and usually one “third year” student. Attending Rounds are made 3 or more times a week.

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:30 - 9:30 Rounds</td>
<td>7:30 - 9:30 Rounds</td>
<td>7:30 - 9:30 Rounds</td>
<td>7:30 - 10:00 Rounds</td>
<td>7:30 - 9:30 Rounds</td>
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<td>12:00 - 1:00 House Staff Lecture Series</td>
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<td>12:00 - 1:00 House Staff Lecture Series</td>
<td>12:00 - 1:00 Morbidity &amp; Mortality Conference</td>
<td>12:00 - 1:00 House Staff Lecture Series</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every 4th 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.
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of certain disease processes or problems.
2. Medical judgment, analysis of medical data, and synthesis of information.
3. Improved history and physical examination.
4. Basic science foundations.
5. Knowledge of drugs.
7. Utilization of health care team.
8. Oral presentations.
9. Library research and interpretation of literature

DESCRIPTION:

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Coronary artery disease
2. Pneumonia
3. Chronic obstructive pulmonary diseases
4. Diabetes Mellitus
5. Hepatic disease
6. Arthritis
7. Gastrointestinal hemorrhage
8. Cerebrovascular disease

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 30

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call with housestaff every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will assume responsibilities of a clinical clerk on a general medicine service. By arrangement, a room within the hospital may be available for the entire month’s rotation: St. Mary Medical Center, 1050 Linden Avenue 887, Long Beach, CA 90801.
**ME450.04 INPATIENT MEDICINE**

**Subinternship\Inpatient**  
**Location:** WVA  
**1998-99**

**COURSE CHAIR:**  
Paul Schneider, MD.  
PHONE #: (310)-268-3125

**SUPPORTING FACULTY:**  
Samuel Burstein, M.D.

**STUDENT COORDINATOR:**  
Dorothy Frasier  
PHONE #: (310)-268-3034

**REPORT TO:**  
Dr. Paul Schneider, Bldg. 500, Rm 3209, 8:30 am.

**PREREQUISITES:**  
Medicine and Surgery

**AVAILABLE TO EXTERNS:** yes

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

**DURATION:** 4 weeks

**1998-99 ELECTIVES BEGIN WEEKS:**  
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

**LEARNING OBJECTIVES (in order of importance)**

1. Diagnosis, understanding and management of diseases (cardiac, pulmonary, infectious, gastrointestinal, renal), and metabolic disturbances, either singly or in a multisystem fashion, inclusive of most internal medicine and subspecialities.

2. Improved history and physical techniques, stressing the ability to focus and prioritize.

3. Diagnosis and management of complex in-patient problems.

4. Development of oral presentation skills in a conference setting.

5. Improving doctor-patient relationships.

6. Team approach and utilization of allied health personnel.

7. Test utilization and interpretation, including LFTs, serologies, ABGs, electrolytes, PFTs, and critical parameters of cardiopulmonary and renal function.

8. Pharmacology of cardiac drugs, antihypertensives, antibiotics, anti-neoplastics, and anti-inflammatory drugs.


10. Socioeconomic aspects of medical care, e.g., cost-containment

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

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**

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

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

**CLOSE CONTACT WITH:**

X FULL TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER Students, Health staff

**APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:** 15-20

**TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:** 50-60

**TYPICAL WEEKLY SCHEDULE**

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| AM   | 8:00 Ward rounds  
8:30 Case conference  
9:00 Morning report  
10:00 Attending rounds | 8:00 Ward rounds  
8:30 Case conference  
9:00 Morning report  
10:00 Attending rounds | 8:00 Ward rounds  
9:00 Morning report  
10:00 Attending rounds | 8:00 Ward rounds  
8:30 Case conference  
9:00 Morning report  
10:00 Attending rounds |
| PM   | Noon conference  
1:00 Patient management  
Subspecialty lectures | Interns case conference  
1:00 Patient management | Medical grand rounds  
1:00 Patient management | Journal club  
1:00 Patient management | Noon conference  
1:00 Patient management |

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** Students will take call with their team every fifth 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 workup and follow. The student will be expected to attend the noon-day conferences and present cases on attending rounds.

197
COURSE CHAIR: Pragnesh Patel, M.D.  
PHONE #: (213)-783-4516

SUPPORTING FACULTY: Peter Chee, M.D., and the Staff of the Department of Internal Medicine

STUDENT COORDINATOR: Beatriz Clark  
PHONE #: (213)-783-4516

REPORT TO: Renea, Academic Affairs, 4733 Sunset West Mezzanine, 8:30 a.m. Then to Marina 4950 Sunset, 6th Floor

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

AVAILABLE TO EXTERNALS: yes

PREREQUISITES: Medicine & Surgery

STUDENTS / PERIOD: max 2 min 1

DURATION: 3-8 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1,5,9,13,17,21,25,29,33,37,41,45,49.

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.

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

INPATIENT: 100%  
OUTPATIENT: %

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

PRIMARY CARE: 100%

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>8:00 Morning report</td>
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<tr>
<td>PM</td>
<td>12:30 Hematology/ Renal Conference</td>
<td>2:00 Internal Medicine Education Conference (Grand Rounds) 3 hrs.</td>
<td>12:30 Cardio Conf</td>
<td>12:30 ID/ONC Conf.</td>
<td>12:30 GI Conf.</td>
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<td>1:30 Patient care</td>
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<td>1:30 EKG Conference</td>
<td>3:00 Patient care</td>
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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.
LEARNING OBJECTIVES (in order of importance)
1. Knowledge of pathogenesis, natural history, differential diagnosis and management of various diseases including diabetes mellitus, pneumonia, COPD, congestive heart failure, GI bleeding, coronary artery disease, endocarditis, etc.
3. Experience in primary patient responsibility, acting as a subintern.
4. Ability to read and interpret chest x-rays; read EKGs.
5. Techniques or procedures such as lumbar punctures, thoracentesis, paracentesis, central lines.
6. Improved history, physical exam, and presentation.
7. Improving the doctor-patient team.
8. Team approach and utilization of allied health personnel.

DESCRIPTION:

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Pneumonia
2. Tuberculosis
3. GI bleeding
4. Asthma
5. Congestive heart failure
6. Cancer
7. Diabetes
8. HIV related illnesses

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 250

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>7:30 - 9:00 Work rounds 9:00 - 10:00 Morning report 10:00 - 12:00 Attending rounds</td>
<td>7:30 - 9:00 Work rounds 9:00 - 10:00 Morning report 10:00 - 12:00 Attending rounds</td>
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<td>7:30 - 9:00 Work rounds 9:00 - 10:00 Morning report 10:00 - 12:00 Attending rounds</td>
<td>7:30 - 9:00 Work rounds 9:00 - 10:00 Morning report 10:00 - 12:00 Attending rounds</td>
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<td>PM</td>
<td>12:00 - 1:00 Chief rounds 3:00 - 5:30 Ward work</td>
<td>12:00 - 1:00 Noon conference 1:00 - 3:00 Continuity clinic 3:00 - 5:30 Ward work</td>
<td>12:00 - 1:00 Noon conference 3:00 - 5:30 Ward work</td>
<td>12:00 - 1:00 Noon conference 3:00 - 5:30 Ward work</td>
<td>12:00 - 1:00 Noon conference 3:00 - 5:30 Ward work</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every 6th night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Subinterns have primary responsibility for patient care, although closely supervised by members of the ward team.
LEARNING OBJECTIVES (in order of importance)

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

DESCRIPTION: Students will function as subinterns under the guidance of the resident and attending physician, doing work-up of patients in rotation with three interns on a general medicine team. Attending rounds will be daily with teaching sessions, depending on the ward assignment. The three general medicine teams work as a firm with a group of attendings and residents. Teams admit daily and internally cover their patients. Close relations and communication with the firm’s ambulatory physicians is strongly encouraged and represents a model practice. 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. X-ray rounds are generally once a week and arranged by the team dependent upon call.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 50-70

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 - 9:30 Pre Rds &amp; Morning Report</td>
<td>8:00 - 9:30 Pre Rds &amp; Morning Report</td>
<td>7:30 Work Rounds</td>
<td>8:00 - 9:30 Pre Rds &amp; Morning Report</td>
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<td>9:30 - 10:30 Resident Work Rounds</td>
<td>9:30 - 10:30 Resident Work Rounds</td>
<td>8:30 - 9:45 Medical Grand Rds</td>
<td>9:30 - 10:30 Resident Work Rounds</td>
<td>9:30 - 10:30 Resident Work Rounds</td>
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<td>PM</td>
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<td>12:00 - 1:00 Noon Conference</td>
<td>12:00 - 1:00 Intern Intake</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The Sub I will take call with one of the residents on every sixth night. Weekend call will be assigned by the residents; however, there should be approximately one day off per week (week or weekend day).

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.
LEARNING OBJECTIVES (in order of importance)

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

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

COMMON PROBLEMS/DISEASES

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>8:00 - 10:00 Attending rounds 10:00 - 10:30 Radiology Conference 10:30 - 12:00 Patient care</td>
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<td>PM</td>
<td>12:00 - 1:00 Critical Care Conference 1:00 - Patient care</td>
<td>12:00 - 1:00 Pulmonary Clinical Conference 1:00 - Patient care</td>
<td>12:00 - 1:00 Pulmonary Care Curriculum Patient Care 1:00 - Patient care</td>
<td>12:00 - 1:00 Pulmonary Care Curriculum Patient Care 1:00 - Patient care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On-call every 4th day and night along with medical resident. Saturday and Sunday: Attending rounds from 9:30 - 11:00 am.

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.
MEDICAL INTENSIVE CARE UNIT (MICU)

COURSE CHAIR: Lawrence Maldonado, M.D. (310) 855-4684
SUPPORTING FACULTY: Drs. Mark Ault, A. Gray Elldrodt, Philip Ng, and Peter Chiu
STUDENT COORDINATOR: Judy Jacobs (310) 855-4658
REPORT TO: Judy Jacobs, Cardiology Conference Room, Room 5413, North Tower, 9:00 am.
AVAILABLE TO EXTERNS: yes
PREREQUISITES: Medicine
STUDENTS / PERIOD: max 2 min 1
DURATION: 4 weeks

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

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.

COMMON PROBLEMS/DISEASES
1. Acute myocardial infarction & failure
2. Septic shock
3. GI Hemorrhage
4. Complicated respiratory failure
5. CNS Catastrophes
6. Drug intoxications
7. Acute renal failure
8. Acid-based and electrolyte imbalance

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 12-20
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

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<td>9:00 MICU Work Rounds</td>
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<td>8:00 A.P.G.</td>
<td>9:00 MICU Work Rounds</td>
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<td></td>
<td>10:30 X-ray conf. MICU</td>
<td>10:30 X-ray conf. MICU</td>
<td>10:30 X-ray conf. MICU</td>
<td>9:00 MICU Work Rounds</td>
<td>10:30 X-ray conf. MICU</td>
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<td>11:00 MICU case presentations</td>
<td>11:00 MICU case presentations</td>
<td>11:00 MICU case presentations</td>
<td>10:30 X-ray conf. MICU</td>
<td>11:00 MICU case presentations</td>
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<td>3:30 Core curriculum</td>
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<td>4:30 MICU sign-out Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students on this elective will be on-call every third night and will participate during week-end 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 sub-specialty consultants from the private and full-time attending staff are available. In addition, formal didactic conferences will be given four times weekly.
LEARNING OBJECTIVES (in order of importance)

1. Diagnosis and management of chronic obstructive pulmonary disease (COPD), status asthmaticus, acute respiratory distress syndrome (ARDS), pneumonia, pulmonary emboli, septic shock, pulmonary complications of AIDS, chronic interstitial lung disease, and carcinoma of the lung. Medical judgment in the analysis and synthesis of pulmonary medicine and medical information.

2. Demonstration and utility of relevant clinical diagnostic skills in pulmonary critical care.

3. Application of respiratory-physiology to the diagnosis and management of respiratory failure. Extensive respiratory care unit experience. Special emphasis on heart-lung interaction.


5. Introduction of chest x-ray, lung scans, pulmonary function, tests, arterial blood gases, and hemodynamic measurements.

6. Medical ethics, especially regarding intensive care.

7. Rational decision making.

DESCRIPTION: This rotation provides an excellent environment to learn principles of management and appropriate workup 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 4-week elective is to familiarize students with the investigation and treatment of acute and chronic respiratory diseases requiring intensive care. The 8-bed RICU is managed by 2 housestaff teams (1 resident & 1 intern per team) on an every 4th night rotation.

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 16
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>10:00 - 12:00 RICU teaching rounds</td>
<td>10:00 - 12:00 RICU teaching rounds</td>
<td>8:00 - 9:00 Pulmonary grand rounds</td>
<td>10:00 - 11:00 RICU teaching rounds</td>
<td>8:30 - 9:30 Medical grand rounds</td>
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<td></td>
<td>11:00 - 12:00 RICU Core Curriculum</td>
<td>11:00 - 12:00 RICU Core Curriculum</td>
<td>10:00 - 12:00 RICU teaching rounds</td>
<td>11:00 - 12:00 RICU core curriculum</td>
<td>10:00 - 12:00 RICU teaching rounds</td>
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<tr>
<td>PM</td>
<td>4:30 - 5:00 Sign out rounds</td>
<td>4:30 - 5:00 Sign out rounds</td>
<td>4:30 - 5:00 Sign out rounds</td>
<td>12:00 - 1:00 Critical care M &amp; M conf.</td>
<td>4:30 - 5:00 Sign out rounds</td>
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<td>4:30 - 5:00 Sign out rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every 4th 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.
LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis and natural history, the orderly investigation, differential diagnosis and management of cardiac disease, principally ischemic, but including other types as well.

2. Clinical skills: medical interviewing and physical examination.


4. Special skills, including emphasis on EKG reading.

5. Diagnosis and management of complex inpatient problems.


7. Oral presentation of clinical cases.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Acute myocardial infarction
2. Congestive heart failure
3. Acute pulmonary edema
4. Hypotension and shock
5. Cardiac arrhythmias
6. Valvular heart disease
7. Unstable angina
8. Cardiomyopathy

INPATIENT: 100%

OUTPATIENT: 0%

CONSULTATION: 0%

PRIMARY CARE: 100%

CLOSE CONTACT WITH:

X FULL TIME FACULTY

X CLINICAL FACULTY

X FELLOWS

X RESIDENTS

X INTERNS

OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15-20

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 250-300

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>7:30 - 9:00 am Clinical rounds</td>
<td>7:30 - 9:00 am Clinical rounds</td>
<td>7:30 - 9:00 am Clinical rounds</td>
<td>7:30 - 9:00 am Clinical rounds</td>
<td>7:30 - 9:00 am Clinical Conference</td>
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<td>9:00 - 10:00 am Sign-in conference</td>
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<td>10:00 - 12:00 Bedside rounds</td>
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<td>12:00 - 1:30pm EKG didactic session</td>
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<td>3:00 - 4:00 pm CCU core lecture</td>
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<td>4:00 - 5:00 pm Sign-out rounds in CCU</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One night in four including weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR:  Guy Soohoo, M.D.  
PHONE #: (310)-268-3021  
FAX#: (310) 268 4712

SUPPORTING FACULTY:  
Ani Oren, M.D., Steve Dubinett, M.D., Patrice Miller, M.D., Silverio Santiago, M.D.

STUDENT COORDINATOR:  Caroline Bruce  
PHONE #: (310)-268-3021

REPORT TO:  Guy Soohoo, M.D., Bldg. 500, Room 3013 @ 8:30 am.

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 3 min 1

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS: 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

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.

LEARNING OBJECTIVES (in order of importance)
2. Diagnosis and management of cardiac disease, pulmonary disease, infectious disease, gastrointestinal disease, renal disease, and metabolic disturbances, either singly or in a multisystem fashion.
3. Indications, applications, and utilization of invasive monitoring, including pulmonary-artery catheterization.
4. Indications and utilization of mechanical ventilation.
5. Arterial blood gas analysis and interpretation of mixed metabolic disturbances.
6. Understanding the rational use of pressors, inotropes, antibiotics, anti-arrhythmics, oxygen, steroids, etc., in the critically ill patient.
7. Appreciation of the team approach to the critically ill patient.

COMMON PROBLEMS/DISEASES
1. Infection and septic shock
2. Respiratory failure
3. Decompensated liver disease
4. Gastrointestinal bleeding
5. Multiple metabolic disturbances
6. Malignant hypertension
7. Congestive heart failure
8. Ischemic heart disease

INPATIENT:  100%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Critical care nurses

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  10

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  85

TYPICAL WEEKLY SCHEDULE

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</table>
| AM     | 8:00 Unit rounds  
8:30 Resident case conference  
9:00 - 9:30 X-ray rounds  
9:30 Attending rounds | 8:00 Unit rounds  
8:30 Resident case conference  
9:00 - 9:30 X-ray rounds  
9:30 Attending rounds | 8:00 Unit rounds  
9:00 - 9:30 X-ray rounds  
9:30 Attending rounds | 8:00 Unit rounds  
8:30 Resident case conference  
9:00 - 9:30 X-ray rounds  
9:30 Attending rounds | 8:00 Unit rounds  
8:30 Resident case conference  
9:00 - 9:30 X-ray rounds  
9:30 Attending rounds |
| PM     | Noon conference  
1:30 ICU lecture  
Patient management  
4:00 Sign out rounds | Intern case conference  
1:30 ICU lecture  
Patient management  
4:00 Sign out rounds | Medical grand rounds  
Patient management  
4:00 Sign out rounds | Journal Club  
Patient management  
4:00 Sign out rounds | Noon conference  
1:30 ICU lecture  
Patient management  
4:00 Sign out rounds |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Call is every third night. Saturday and Sunday rounds from 8:30 - 12:00.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  This elective provides excellent preparation for a medical or surgical internship and lays the groundwork for other specialties, e.g., anesthesia. The rotation emphasizes student autonomy and responsibility under the watchful eye of a resident, pulmonary fellow, and staff physician. The student will be the primary physician for the patients they work up and follow.
LEARNING OBJECTIVES (in order of importance)

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

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Coronary artery disease/acute m.i.
2. Unstable angina pectoris
3. Pulmonary edema/congestive heart failure
4. Cardiac arrhythmias
5. Valvular heart disease
6. Cardiac conduction defects
7. Acute pericarditis/pericardial tamponade
8. Infective endocarditis

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 200

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 Work rounds</td>
<td>8:00 Work rounds</td>
<td>Bedside teaching rounds</td>
<td>8:00 Work rounds</td>
<td>Work rounds</td>
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<td>9:00 CCU rounds</td>
<td>9:00 CCU rounds</td>
<td>8:00 Work rounds</td>
<td>9:00 CCU rounds</td>
<td>12noon EKG conference</td>
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<td></td>
<td>Noon conference (Medical Service)</td>
<td>11am Core-curriculum (students)*</td>
<td>9:00 CCU rounds</td>
<td>11am Core-curriculum (students)*</td>
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<td>12 noon Fellow Core-curriculum lecture</td>
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<td>12 noon Journal Club</td>
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<td>PM</td>
<td>Patient Management</td>
<td>12:00 Medical grand rounds</td>
<td>Patient Management</td>
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<td>3:00 Nuclear Cardiology conference</td>
<td>Patient Management</td>
<td>Cardiology conf. (optional)</td>
<td>Cardiology New Patient Clinic (optional)</td>
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<td>4:00 Med-Surgery cath conf (optional)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call is every 4th night in conjunction with the PGY 1 & PGY 2. 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: The student will find this elective to contain the elements necessary for him/her to gain a comprehensive appreciation of the complexities of cardiology as well as an introduction to the use of instruments used in the invasive and noninvasive evaluation of the entire spectrum of cardiac disease. The student should have learned to read and interpret electrocardiograms very well by the end of the rotation. * Scheduled if more than 3 students on Cardiology and Consult Rotations.
ME456.01  GERIATRIC MEDICINE

Subinternship\ Inpatient  Location:  WVA  1998-99

COURSE CHAIR:  PHONE #:  DR. STEVEN CASTLE  (310)-268-4110

SUPPORTING FACULTY:  
D. Norman, M. Cantrell, A. Chan, T. Hahn, S. Dhanani

STUDENT COORDINATOR:  PHONE #:  CLAUDETTE ISAAC  (310)-268-4110

REPORT TO:  
Bldg. 500, Room 2221 (2 East B), 8:00 am on first day.

PREREQUISITES:  Medicine, Surgery, Neurology, Psychiatry, Radiology

AVAILABLE TO EXTERNERS:  yes

STUDENTS / PERIOD:  max 2  min 1

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of biological and psychological aspects of aging.
2. Knowledge of the pathogenesis, natural history, differential diagnosis, evaluation, and management of common diseases and disorders of the elderly.
3. Knowledge of the impact of aging on drug pharmacology.
5. Medical decision-making: emphasis on altered presentation of disease, multiple illnesses, risk-benefit, costs, rehabilitative potential, and medico-legal/ethical issues.
6. Improving doctor-patient communication and interaction with reference to the elderly.
7. Interpretation of tests: normal values for elderly, physiological changes due to aging.
8. Understanding societal and personal attitudes toward aging and the elderly, as well as developing a positive and humanistic approach to the care of the older person.

DESCRIPTION:  This is one of the electives of the Multicampus Division of Geriatric Medicine, which encompasses programs at the VAMC West Los Angeles (Wadsworth), VAMC Sepulveda, UCLA Medical Center and Jewish Homes for the Aging. All students, regardless of primary site, will participate in the following Multicampus educational activities: Weekly Tuesday clinical conference, research seminar, and journal club.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  
1. Arterioslerotic heart disease  
2. Dementia  
3. Incontinence  
4. Stroke/rehabilitation  
5. Infections  
6. Sensory impairment  
7. Falls  
8. Failure to thrive

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  3 - 4

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

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:00 Work rounds  
10:30 Faculty Teaching rounds  
12:00 Medical service M & M Conference  | 8:00 Work rounds  
10:30 Faculty Teaching rounds  
12:00 Medical service M & M Conference  | 8:00 Work rounds  
Geriatric Topic Session  
10:30 Faculty Teaching rounds  
12:00 Medical service grand rounds  | 8:00 Work rounds  
Geriatric Lecture  
10:30 Faculty Teaching rounds  
12:00 Medical service lecture  | 8:00 Work rounds  
Geriatric Lecture  
10:30 Faculty Teaching rounds  
12:00 Medical service lecture  |
| PM   | 2:00 Team meeting  
3:00 Multicampus Division clinical lecture  
4:00 Multicampus Division research seminar/Journal Club  | 3:00 Multicampus Division clinical lecture  
4:00 Multicampus Division research seminar/Journal Club  | Patient workups  
| Patient workups  | 2:00 Team meeting  
Patient workups  | Patient workups  |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  No night calls. See assigned patients on weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will have the opportunity to learn about problems associated with aging by doing 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.
COURSE CHAIR: PHONE #:
Haragopal Thadepalli, M.D. (213)-563-4822 or 9347


STUDENT COORDINATOR: PHONE #:
Deborah Christian/Corine Clark (213)-563-4822

REPORT TO: Cobb Bldg., Room 121 @ 8:30 a.m., King/Drew Medical Ctr., 1621 E. 120th St.

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 3 min 2

DURATION: 2 or 4 weeks

1998-99 ELECTIVES BEGIN WEEKS: By Arrangement

DESCRIPTION: The clinical program of Geriatrics and Gerontology has special relevance to inner city minorities and provides an opportunity for outreach programs. KDMC program includes preventive programs in addition to care of elderly at senior centers, a concerted effort with the Dept. of Aging, City of L.A. Special emphasis is placed on geriatric evaluation methods. These include thorough inpatient evaluation, outpatient assessment, and comprehensive geriatric training. The students have full inpatient on outpatient responsibilities.

LEARNING OBJECTIVES (in order of importance)
1. Knowledge of biological and psychosocial aspects of aging.
2. Knowledge of the pathogenesis, natural history, differential diagnosis, evaluation and management of common diseases or disorders of the elderly.
3. Knowledge of the impact of aging on drug pharmacology.
5. Medical decision-making: emphasis on altered presentation of disease, multiple illnesses, risk-benefit, costs, rehabilitative potential, and medicolegal/ethical issues.
6. Improving doctor-patient communication and interaction with reference to the elderly.
7. Interpretation of tests: normal values for elderly; physiological changes due to aging.
8. Understanding societal and personal attitudes toward aging.
10. Consultations for elderly patients seen in emergency room.
11. Geriatric consultations for inpatient services.
12. To participate in outreach programs designed to offer preventive health to seniors in community based settings.

COMMON PROBLEMS/DISEASES
1. Cardiovascular
2. Infections in elderly
3. Mobility and muscle strength/falls
4. Nutrition and diet
5. Mental health
6. Urinary tract problems
7. Pulmonary function
8. Visual, hearing, and dental disorders

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Physician Assistant, Pharmacists, Nurses, Social Workers, ENT, Eye and dental faculty

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 20

TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:30-8:30 Morning Report</td>
<td>7:30-8:30 Morning Report</td>
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<td>10-11:30 Faculty Teaching Rounds</td>
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<td>10-11:30 Faculty Teaching Rounds</td>
<td>9:00-12:00 Geriatric Clinic</td>
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<td>11:30-12:30 Topic Lecture</td>
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<td>PM</td>
<td>1:00 - 5:00 Patient workups/ Consultations</td>
<td>1:00-2:00 Core Lecture</td>
<td>1:00 - 5:00 Patient workups/ Consultations</td>
<td>1:00 - 5:00 Community Health Screening</td>
<td>1:00 - 5:00 Patient workups/ Consultations</td>
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<td>2:00 - 5:00 UCLA Geriatrics Lecture Series</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Night calls & weekends optional. Faculty Teaching Rounds on Saturday and Sunday mornings.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The inpatient services give an opportunity for students to provide primary care to acutely ill hospitalized elderly patients. The purpose is to train students in peculiarities in presentation of ailments in older groups with special emphasis on therapeutic strategies.
ME470.01 MEDICAL REPORTEY ICU
Location: HARBOR

1998-99

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

SUPPORTING FACULTY:
Karlman Wasserman, M.D., Ph.D., Kathy Sietsema, M.D., David Lewis, M.D., Gregory Mason, M.D.

STUDENT COORDINATOR:  PHONE #:
Kathleen McGinley  (310)-222-2409

REPORT TO:  5E-ICU 7:30am on 1st day of elective.

PREREQUISITES:  Medicine, Surgery

AVAILABLE TO EXTERNS:  yes

STUDENTS / PERIOD:  max 3 min 0

DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:
1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 41, 45, 49.

DESCRIPTION:  The student shares responsibility with an intern for 24 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.

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

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Acute respiratory failure
2. GI bleeding
3. Shock
4. Sepsis
5. Hepatic failure
6. Acute renal failure
7. Electrolyte imbalance
8. Coma

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  45

TYPICAL WEEKLY SCHEDULE

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<td>ICU Topic Session</td>
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<td>Clinical Conf.</td>
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<td>Medicine Lecture</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: 24 hours on /24 hours off for 2-3 shifts/week; work alongside ICU intern. Sundays 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.
LEARNING OBJECTIVES (in order of importance)

1. Knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of obstructive airways disease, respiratory failure, pneumonias, infiltrative lung disease, lung carcinoma, etc.

2. Interpretation of chest roentgenograms, pulmonary function tests, arterial blood gases, pleural fluid data, etc.

3. Understanding the indications for bronchoscopy, aspiration lung biopsy, thoracentesis, and pleural biopsy.

4. Knowledge of the pharmacology of bronchodilators and corticosteroids.

5. Understanding the use of mechanical ventilators.

6. Clinical skills: medical interviewing and physical examination.

7. Medical decision making: analysis of medical data and synthesis of information.

DESCRIPTION: Students will be responsible for the evaluation and continued care of a number of patients with respiratory diseases. They will be under the direct supervision of a pulmonary fellow and will attend daily rounds.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 15

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

TYPICAL WEEKLY SCHEDULE

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<td>PM</td>
<td>Consult rounds</td>
<td>Pulmonary grand rounds</td>
<td>Medical grand rounds</td>
<td>Consult rounds</td>
<td>Physiology conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
LEARNING OBJECTIVES (in order of importance)

1. To understand the physiologic and genetic basis of respiratory disease and respiratory failure.
2. To obtain experience in the evaluation and primary care of respiratory patients.
3. Interpretation of pulmonary function tests and arterial blood gases.
4. To experience the use of mechanical ventilators, oxygen supplementation, and nebulization.
5. To observe and assist in bronchoscopy and other bedside procedures.
6. To read chest x-rays.
7. To improve 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 adult cystic fibrosis. 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 Friday PM Chest Clinic. Special attention will be paid to performing a topnotch examination of the lungs.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Lung cancer
2. Asthma
3. COPD
4. Pneumonia
5. Tuberculosis
6. Interstitial disease
7. ARDS
8.

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 40

TYPICAL WEEKLY SCHEDULE

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<td>Attending rounds on chest consultation service (time variable)</td>
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<td>8:30 Grand rounds RCU rounds</td>
<td>Attending rounds on chest consultation service</td>
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<td>2:00 - 3:00 Chest X-Ray conf</td>
<td>1:30 sessions with OVMC attending</td>
<td>3:00 - 4:00 Combined surgical &amp; medical chest conference</td>
<td>Consults and case presentations</td>
<td>Noon-1pm Pulmonary physiology conference 1:00 - 3:30 Chest clinic</td>
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<td>PM</td>
<td>4:00 - 5:00 Chest conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME470.04  PULMONARY DISEASE AT BARLOW RESPIRATORY HOSPITAL

Subinternship\Inpatient  Location: ASSOC  1998-99

COURSE CHAIR:  PHONE #:  David Scheinhorn, M.D.  (213)-202-6855

SUPPORTING FACULTY:  David Nelson, M.D., and Christopher Ho, M.D.

STUDENT COORDINATOR:  PHONE #:  Dianne Wheatley  (213)-202-6860
REPORT TO:  2000 Stadium Way, LA, 1st floor switchboard @ 9:30 a.m. Ask for Dianne Wheatley.

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes
STUDENTS / PERIOD:  max 2  min 1
DURATION:  4 weeks

1998-99 ELECTIVES BEGIN WEEKS:  By Arrangement

LEARNING OBJECTIVES (in order of importance)
1. Enhance basic knowledge of pulmonary medicine
2. 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.
5. Learn appropriate format for medical record keeping and for writing consultations.
6. Participate as a member of the health care team.
7. Participate in the management of patients enrolled in ongoing pulmonary research studies.
8. Understand research protocols and assist attending physician in data collection procedures, such as work of breathing and oxygen cost of breathing.

DESCRIPTION:  Students will join an existing attending physician-pulmonary fellow team with whom they will round. They will function as interns, admitting & managing 1 to 3 patients a week. The attending physician will supervise the students, countersigning workups & orders. Students will attend 3 noon teaching conferences at which 1) new patients are presented & discussed; 2) chest x-rays & 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.

COMMON PROBLEMS/DISEASES
1. Respiratory failure
2. COPD
3. ARDS
4. Pneumonia, bacterial
5. Congestive heart failure
6. Electrolyte imbalance
7. Diabetes mellitus
8. Renal insufficiency

STUDENT EXPERIENCES

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  8-12
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  30

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

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

212