EM320.01  EMERGENCY MEDICINE


COURSE CHAIR:  PHONE #
Larry J. Baraff, M.D.  (310) 794-0580
E-Mail: lbaraff@mednet.ucla.edu

SUPPORTING FACULTY:
UCLA and Olive View Emergency Medicine Faculty.

STUDENT COORDINATOR:  PHONE #
Wayne Hasby  (310) 794-0585
E-Mail: whasby@mednet.ucla.edu

REPORT TO:
Attending Physician, EMC Central Work Area, CHS 8:00

PREREQUISITES:  Surgery, Medicine, OB/Gyn and Pediatrics

AVAILABLE TO EXTERNALS:  YES

STUDENTS / PERIOD:  max 2. Additional students with course chair approval.  E-mail Dr. Baraff with dates desired and post-

DURATION:  3 weeks

2001-2002 ELECTIVES BEGIN WEEKS:
1,4,7,10,13,16,19,22,27,30,33,36,39,42,45

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

COURSE OBJECTIVES:
1. First hour management of medical and surgical emergencies
2. Differential Diagnosis of common illnesses presenting to the Emergency Department.
3. Tailoring of history and physical examinations for acutely ill patients.
4. Refinement of surgical techniques.
5. Evaluation of laboratory results including x-ray and EKG interpretation.
6. Appropriate use of laboratory tests.
7. Learning to establish good patient-doctor relationships in the acute care setting.
8. Appropriate use of essential drugs.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Major & Minor Trauma
2. Cardiac Emergencies: Chest Pain
3. Acute Respiratory Distress
4. Acute Febrile Illness
5. Toxicology
6. Altered Mental Status
7. Abdominal Pain & Ob-Gyn Emergencies

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

APPORXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  75
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  6,500

TYPICAL WEEKLY SCHEDULE

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<td>Attending Rounds</td>
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<td>Attending Rounds</td>
<td>Primary Patient Care</td>
<td>Trauma Conference</td>
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<td>Primary Patient Care</td>
<td>Grand Rounds Conference</td>
<td>Student Lectures</td>
<td>Pediatric/Surgery Conference</td>
<td>X-Ray Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Shifts are either 1500-2300 or 0800-1600 to 2400 and 2400-0800 at OVMC, including weekends.  Attendance at all conferences is mandatory regardless of rotating schedule.

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

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

STUDENT EXPERIENCES
INPATIENT: 0%
OUTPATIENT: 100%
CONSULTATION: 0%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 60 - 80
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 3600

TYPICAL WEEKLY SCHEDULE

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<td>9:00-12:00 Medical Student Lecture Day (1st day)</td>
<td>8:30 Pediatric EM Conference</td>
<td>8:30 Procedure Conf.</td>
<td>9:00 M&amp;M Conference</td>
<td>9:00 Journal Club</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students spend 40 hours per week in the department which may include weekend and night shifts.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Additional rotations may be available by special arrangement.
EM320.03  EMERGENCY MEDICINE


COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
Drs. C. Choi & B. Heller  (562) 491-9350
1. Knowledge of certain disease processes or problems.

SUPPORTING FACULTY:  COURSE CHAIR: PHONE #:
Emergency Room Staff  Drs. C. Choi & B. Heller (562) 491-9350
2. Medical judgment, analysis of medical data, and synthesis of information.

STUDENT COORDINATOR:  PHONE #:  COURSE CHAIR: PHONE #:
Julie Yan  (562) 491-9350  Drs. C. Choi & B. Heller (562) 491-9350
3. Improved history and physical examination.

PREREQUISITES:  COURSE CHAIR: PHONE #:
Emergency Room Staff  Drs. C. Choi & B. Heller (562) 491-9350
4. Basic Science foundation.

AVAILABLE TO EXTERNS:  COURSE CHAIR: PHONE #:
Yes  Drs. C. Choi & B. Heller (562) 491-9350
5. Interpretation of tests.

STUDENTS / PERIOD:  COURSE CHAIR: PHONE #:
max 1 min 1  Drs. C. Choi & B. Heller (562) 491-9350

DURATION:  COURSE CHAIR: PHONE #:
3 weeks  Drs. C. Choi & B. Heller (562) 491-9350
7. Utilization of health care team.

2001-2002 ELECTIVES BEGIN WEEKS:
1, 5, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

DESCRIPTION:  COURSE CHAIR: PHONE #:
Students will see Emergency Medicine patients for their initial evaluation and will work directly with the EM attending physician to carry out diagnostic treatment plans. The attending physician provides the primary teaching input and additional informal instruction is given by residents and interns rotating in the department.  Drs. C. Choi & B. Heller (562) 491-9350

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

INPATIENT:  CONSULTATION:  CLOSE CONTACT WITH:
0%  0%  X  FULL TIME FACULTY
OUTPATIENT:  X  CLINICAL FACULTY
100%  FELLOWS

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:
300  2600

TYPICAL WEEKLY SCHEDULE

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will see EM patients for their initial evaluation & will work directly with the EM attending physician to carry out diagnostic & treatment plans. The attending physician provides the primary teaching input & additional informal instruction is given by residents and interns rotating in the department.  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,
EM320.06  EMERGENCY MEDICINE SUBINTERNSHIP

Subinternship  Location:  KERN

COURSE CHAIR:  
Eugene E. Kercher, M.D.  (805) 326-2160

COURSE OBJECTIVES (in order of importance)
1. Recognition, evaluation, and management of emergency disease processes, including cardiopulmonary resuscitation.
2. Improved problem oriented history and physical examination.
3. Development of clinical judgment, synthesis of clinical and laboratory data.
4. Improvement of manual dexterity in performing emergency procedures.
5. Consideration of cost effective emergency care and health care access issues.
6. Interpretation of tests and special skills (e.g., lab tests, x-rays, CT scans, emergency ultrasound)
7. Medical record keeping.
8. Improving the doctor-patient relationship.

SUPPORTING FACULTY:
Drs. Purcell, Docherty, Dong, Downie, Horn, Martinez, Sverchek, Patel, McPheters, Heer, Ferguson.

STUDENT COORDINATOR:  PHONE #:
Gloria McAfee  (805) 326-2161

REPORT TO:  Emerg. Medicine Admin. Office/Kern Med. Ctr., 1830 Flower St., Bakersfield, CA @ 8:00 a.m.

PREREQUISITES:  Medicine, Surgery, Pediatrics & OB/Gyn

AVAILABLE TO EXTERNALS:  Yes

STUDENTS / PERIOD:  max 1 min 1

DURATION:  3 weeks

2001-2002 ELECTIVES BEGIN WEEKS:  By Arrangement

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

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  80
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE:  4500

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>8:00 - 12:00 Emergency Department</td>
<td>8:00 - 10:00 Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  All patients seen are presented to faculty who are in the ED 24 hours/day.  Students function approximately at the level of an intern.  Meals are provided by KERN.  Housing, travel, and malpractice/health insurance are not provided by KERN.  Students may elect to take any 8-hour shift, 24/hrs a day.  A student handbook of core reading materials is provided at the start of the rotation.
EM350.04  EMERGENCY MEDICINE

Subinternship  Location: KDMC  2001-2002

PHONE #:
Patrick Aguilera, M.D.  (310) 668-4510

SUPPORTING FACULTY:
Dept. of Emergency Medicine Faculty at Charles Drew/MLK

STUDENT COORDINATOR:
Debra Williams  (310) 668-5235

COURSE CHAIR: PHONE #:
Patrick Aguilera, M.D. (310) 668-4510

SUPPORTING FACULTY:
Dept. of Emergency Medicine Faculty at Charles Drew/MLK

STUDENT COORDINATOR: PHONE #:
Debra Williams  (310) 668-5235

REPORT TO: Emergency Medicine Faculty Emergency Room, KDMC @ 7:00 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNALS: No

STUDENTS / PERIOD: max 6 min 1

DURATION: 3 weeks

2001-2002 ELECTIVES BEGIN WEEKS:
By Arrangement

COURSE OBJECTIVES (in order of importance):
1. Recognize and evaluate severely traumatized patients and establish the priorities of management.
2. Observe and perform, under direct faculty supervision, those manipulative skills and procedures involved in diagnosis and stabilization of the acutely ill and injured patient.
3. Recognize the need and appropriateness of referral to other clinical services in the hospital.
4. Manage certain urgent medical emergencies in the emergency room and eliminate expensive hospitalization.
5. Be involved in cost-efficient emergency care without compromising patient care (elimination of skull x-rays in head trauma).
6. Recognize, evaluate, and devise a treatment plan for all emergencies, including acute cardiac, acute pulmonary, acute non-traumatic surgical, etc.
7. Knowledge of pathophysiology in the urgent and emergent patient: Shock and fluid balance, cardio-pulmonary resuscitation, etc.
8. Familiarize with role and capabilities of pre-hospital care personnel.

DESCRIPTION: This elective will provide the student an excellent opportunity to be involved in the diagnosis and management of critically ill and injured patients, not only at the source of entry to the health care system (emergency room), but also at the pre-hospital care level through their involvement with the base stations activities of the Emergency Room. There are over 90,000 urgent and emergent types of patients seen in the ER at MLK, providing over 70% of the inpatient admissions (continued in “Add'l Comments”).

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Multi system trauma
2. Acute Cardiac (M.I.)
3. Acute Pulmonary
4. Acute Overdose
5. Acute GYN Emergencies
6. Diabetics / life threatening complications
7. Upper and Lower G.I. Bleeding
8. Acute pediatric emergencies

INPATIENT: 0%
OUTPATIENT: 100%
CONSULTATION: 0%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER PAs, Paramedics, etc.

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 50
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 6000

TYPICAL WEEKLY SCHEDULE

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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students work on teams with Senior Resident in Emergency Medicine, 36-48 hour/week including nights and 2 weekend/month.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The patient load consists of all possible life threatening emergencies and consists of the following: 1) 30% major multisystem trauma; 2) 5% acute cardiac; 3) 5% acute pulmonary emergencies; 4) 6% acute seizure disorders; 5) 5% acute psychiatric emergencies; 6) 3% acute drug overdose; 7) 1.5% diabetics with life threatening complications; 8) 3% acute non-traumatic surgical emergencies, etc.
EM350.05  EMERGENCY MEDICINE

Subinternship  Location: WVA  2001-2002

COURSE CHAIR:  PHONE #:
Zhaoping Li, M.D.  (310) 268-3125

SUPPORTING FACULTY:
Samuel Burnstein and Gino Vaghaiwalla

STUDENT COORDINATOR:  PHONE #:
Dorothy Frazier  (310) 268-3034

REPORT TO:  Zhaoping Li, M.D., Emergency Room
Wadsworth VA, Bldg 500

PREREQUISITES: Medicine, Surgery, OB-Gyn, and Psychiatry

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2001-2002 ELECTIVES BEGIN WEEKS:
1, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

COURSE OBJECTIVES (in order of importance)
1. Rapid emergency room evaluation and treatment of common internal medicine problems.
2. Rapid stabilization of critically ill patients and initiation of diagnostic and therapeutic maneuvers prior to ICU transfer.
3. Evaluation of ABGs, radiographs, EKGs, and preliminary lab data in an ER setting.
4. Decision making with respect to acute hospitalization versus out-patient management.
5. Gain confidence in rapid establishment of doctor-patient relationship in the acute care setting.
6. Continuity of care in the acute care setting.
7. Opportunity to provide non-emergent follow-up of patients seen in the ER who require further ambulatory evaluations.

DESCRIPTION: This rotation allows 4th year students to be the patient’s initial contact with the Emergency Room at the physician level. An emphasis is made upon rapid stabilization and assessment. There is close supervision by an upper-level resident or full-time staff physician.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Ischemic heart disease/chest pain
2. Acute Respiratory Distress
3. Altered mental status
4. Infection, sepsis
5. Drug overdoses
6. Abdominal pain
7. Hypertension

INPATIENT:  0%
OUTPATIENT:  100%
CONSULTATION:  0%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT: 60-80
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 1500

TYPICAL WEEKLY SCHEDULE

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<td>Medical Noon Conference</td>
<td>Interns Report</td>
<td>Medical Grand Rounds</td>
<td>Journal Club</td>
<td>Medical Noon Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

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