ME205.01 CLINICAL IMMUNOLOGY—ALLERGY (CIA)

Advanced Clinical Clerkship Location: CHS 2006–2007
Revised: 11/28/05

COURSE CHAIR: Adrian Casillas, M.D.  PHONE #: (310) 825-3718

SUPPORTING FACULTY:
Adult: Drs. A. Casillas, S. Lee, A. Nel, M. Riedl, A. Saxon
Peds: Drs. T. Chatila, K. Gallagher, M. Garcia-Lloret, D. McCurdy, R. Roberts, E. Stiehm

STUDENT COORDINATOR: Caroline Belz  PHONE #: (310) 825-3718  E-MAIL: cbelz@mednet.ucla.edu

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

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: Yes with pre-approval

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: By Arrangement

DESCRIPTION: Immunology is interfacing with all aspects of clinical medicine. This elective is designed to expose students to the broad array of issues that confront Clinical Immunology as this field interfaces with the rest of Clinical Medicine.

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 WEEK BY STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 50

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tr>
<td>AM</td>
<td>Adult A/I Outpatient Clinic w/ Dr. Riedl</td>
<td>Pediatric Rheumat. Outpatient Clinic w/ Drs. McCurdy, Gallagher</td>
<td>Peds A/I Outpatient Clinic w/ Drs. Steihm, Roberts</td>
<td>Adult A/I Outpatient Clinic w/ Dr. Saxon, Lee</td>
<td>Peds A/I Outpatient Clinic w/ Dr. Saxon, Lee</td>
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<td>Adult A/I Outpatient Clinic w/ Dr. Casillas</td>
<td>Peds A/I Outpatient Clinic w/ Dr. Roberts</td>
<td>Adult A/I Outpatient Clinic w/ Dr. Nel</td>
<td>Peds A/I Outpatient Clinic w/ Dr. Roberts</td>
<td>Peds A/I Outpatient Clinic w/ Dr. Saxon, Lee</td>
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<td>Peds A/I Outpatient Clinic w/ Drs. Roberts, Garcia-Lloret, Stiehm, Chatila</td>
<td>Peds Rheumat. Outpatient Clinic w/ Drs. Gallagher, McCurdy</td>
<td>Peds Rheumat. Outpatient Clinic w/ Dr. Roberts</td>
<td>Peds Rheumat. Outpatient Clinic w/ Dr. McCurdy</td>
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<td>Peds Rheumat. Outpatient Clinic w/ Drs. Gallagher, McCurdy</td>
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<td>Peds Rheumat. Outpatient Clinic w/ Dr. McCurdy</td>
<td>Peds Rheumat. Outpatient Clinic w/ Dr. Gallagher</td>
<td>Peds Rheumat. Outpatient Clinic w/ Dr. Gallagher</td>
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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.

146
ME205.02  CLINICAL ALLERGY AND IMMUNOLOGY

Advanced Clinical Clerkship  Location:  WVA

COURSE CHAIR:  William B. Klaustermeyer, M.D.  PHONE #:  (310) 268-3011

SUPPORTING FACULTY:  Drs. Frank Kwong, Eve Gordon, Maxine Baum

STUDENT COORDINATOR:  Sabrina Lee  PHONE #:  (310) 268-3237

REPORT TO:  William B. Klaustermeyer, M.D.; VA Wadsworth Medical Center, Room 3010; 8:30 a.m.

PREREQUISITES:  Physical Diagnosis, Medicine

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 1 min 1

DURATION:  3 weeks (2 weeks By Arrangement)

2006–2007 ROTATIONS BEGIN WEEKS:  6,9,12,15,18,21,27,30,33,36,39,42,45,48

COURSE 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Bronchial asthma
2. Allergic rhinitis
3. Drug reactions
4. Urticaria/Angioedema
5. Extrinsic Allergic Alveolitis
6. Chronic obstructive lung disease
7. Interstitial lung disease
8. Immune deficiency states

INPATIENT:  10%  OUTPATIENT:  90%  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 WEEK BY STUDENT:  6

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  138

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:30 – 11:30 Allergy/Immunology Clinic WVA</td>
<td>8:30 – 11:00 Allergy Special Procedures WVA</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>1:00 – 4:00 Consultation and Inpatient Review</td>
<td>1:00 – 4:00 Asthma Research Clinic WVA</td>
<td>12:00 Medical Grand Rounds WVA Research</td>
<td>12:00 WVA Basic &amp; Clinical Conference Research</td>
<td>12:00 Med. Specialty Conf. WVA 1:30 – 2:30 Allergy Immunology Staff &amp; Resident Seminar WVA 3:00 – 4:00 Clinical Consults Reviewed WVA</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  During rotation, there will be no night call.

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.
ME205.05  CLINICAL ALLERGY AND IMMUNOLOGY

Advanced Clinical Clerkship  Location: ASSOC  2006–2007
Revised: 12/05/05

COURSE CHAIR:  
Kenneth T. Kim, M.D.  
(562) 997-7888

PHONE #:

COURSE OBJECTIVES (in order of importance)
1. Develop clinical competence and cost-effective outpatient management of common allergic disorders, especially asthma, allergic rhinitis, urticaria, and food allergies.
2. Develop an understanding of procedures used: rhinolaryngoscopy, skin testing, pulmonary function testing, patch testing, bronchial challenges.
3. Understand how to work-up and manage allergic patients in an occupational setting.
4. Develop an understanding of clinical respiratory research from patient recruitment to study enrollment and completion.

SUPPORTING FACULTY:

STUDENT COORDINATOR:  
Andrea Newsom  
(562) 997-7888

PHONE #:

REPORT TO: Dr. Kenneth Kim, 2600 Redondo Ave., Ste. 400 Long Beach, CA 90806 at 8:00 a.m.

PREREQUISITES: Medicine, Pediatrics, or Family Medicine

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 2 or 3 weeks (3 weeks By Arrangement. Submit Drop/Add Form after June2)

2006–2007 ROTATIONS BEGIN WEEKS:
2,4,6,8,10,12,14,16,18,20,22,27,29,31,33,35,37,39,41,43,45,47,49

DESCRIPTION:
This elective will take place at the Allergy, Asthma, and Respiratory Care Center in Long Beach. The student is given the opportunity to work-up patients by taking histories and physicals and then presenting the case to Dr. Kim. Highly motivated students can be given the opportunity to get involved in clinical research, data analysis, or even writing and presenting abstracts and original research.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Asthma
2. Allergic rhinitis
3. Latex allergy
4. Urticaria
5. Insect sting allergy
6. Occupational allergy
7. Anaphylaxis
8. Drug allergy

INPATIENT: 5%
OUTPATIENT: 95%
CONSULTATION: 80%
PRIMARY CARE: 20%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 18

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

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tr>
<td>AM</td>
<td>8:00 – 12:00 Allergy Consults and Office Followups</td>
<td>9:00 – 12:00 Clinical Research and Review of Skin Testing</td>
<td>8:00 – 12:00 Challenge Procedures and Allergy Followups</td>
<td>9:00 – 12:00 Clinical Research and Review of PFTs and Rhinoscopy</td>
<td>8:00 – 12:00 Occupational Allergy Consults</td>
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<td>1:30 – 6:00 Occupational and Latex Allergy Consults Patch Testing</td>
<td>1:50 – 5:00 General Allergy and Asthma Consultations</td>
<td>1:30 – 5:00 Review of Interesting Cases or Literature Review</td>
<td>1:30 – 5:00 General Allergy and Asthma Consultations</td>
<td>1:30 – 5:00 General Allergy and Asthma Consultations</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME207.01  INTEGRATIVE EAST-WEST MEDICINE

Advanced Clinical Clerkship  Location:  CHS/S. MONICA
2006–2007  Revised: 1/3/06

COURSE CHAIR:  PHONE #:
Ka Kit Hui, M.D.  (310) 828-9358

SUPPORTING FACULTY:
Jun-Liang Yu, L.Ac.; Jie-Jia Li, L.Ac.; Xiuling Ma, L.Ac.;
Timothy Pan, M.D.; Bill Tu, M.D.; Ming-Dong Li, L.Ac.;
Malcolm Taw, M.D.; Lawrence Taw, M.D.; Sue Yi, M.D.; Edward Hui,

STUDENT COORDINATOR:  PHONE #:
Betty Leung  (310) 828-9358
E-MAIL:  bleung@mednet.ucla.edu

REPORT TO:  To be arranged.  Check e-mail announcement.

PREREQUISITES:  3rd-year clerkships

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 16  min 10

DURATION:  2 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
31

DESCRIPTION:  This two-week clinically-oriented course is designed for students who are interested in learning about traditional Chinese Medicine (TCM) and in incorporating this system of medicine into their practice and life style.  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.

COURSE 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Fibromyalgia
2. Myofascial pain syndrome (head, back)
3. IBS
4. Chronic fatigue syndrome
5. Hypertension
6. Patients with polypharmacy
7. Women’s health problems
8. Asthma/allergic rhinitis/sinusitis

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 WEEK/STUDENT:
6 per 2 weeks

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

TYPICAL WEEK SCHEDULE

<table>
<thead>
<tr>
<th>Week</th>
<th>Monday</th>
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<tbody>
<tr>
<td>Week 1</td>
<td>Lectures and Demonstration</td>
<td>Lectures and Demonstration</td>
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<td>Case Discussion</td>
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<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>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME210.01   CARDIOLOGY

Advanced Clinical Clerkship     Location: HARBOR     2006–2007
Revised: 12/8/05

COURSE CHAIR: Charles R. McKay, M.D.
PHONE #: (310) 222-2515

SUPPORTING FACULTY:
Drs. Budoff, Criley, Detrano, French, Ginzton, Girsky, Laks
Narahara, Oudiz, Shavelle, McKay, Buljubasic

STUDENT COORDINATOR: Sherryl Isaacs
PHONE #: (310) 222-2517
sisaacs@labiomed.org

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

PREREQUISITES: Medicine and 4th year standing

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

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.

COURSE 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acquired valvular heart disease
2. Congestive heart failure
3. Cardiomyopathies – Intracardiac hemodynamics
4. Pre-op evaluation of cardiac patient
5. Arrhythmias and Intracardiac studies
6. Ischemic heart disease, unstable angina, acute MI

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, NP, Cardiac Rehabilitation

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 – 9:30 ECG Reading</td>
<td>8:30 – 9:30 Medicine Grand Rounds</td>
<td>7:30 – 8:30 ECG Interpretation Conf., Alternate and Basic Hemo-Dynamics</td>
<td>7:30 – 9:00 Fellows Conference or Student presentation</td>
<td>9:00 – 9:30 ECG Reading</td>
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<td>9:30 – 11:00 Consults or Heart Station</td>
<td>10:00 – 12:00 Consults or Heart Station/Stress Test</td>
<td>9:00 – 9:30 ECG Reading</td>
<td>9:00 – 9:30</td>
<td>9:30 – 12:00 Consults or EP Lab</td>
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<td>11:00 – 12:00 Echo – Dr. Buljubasic</td>
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<td>9:30 – 12:00 Consults or Cath Lab</td>
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<td>12:00 – 1:00 Non-Invasive Diag. Conf.</td>
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<td>12:00 – 1:00 M&amp;M Depart. of Medicine</td>
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<td>1:30 – 4:00 Consult. Svc Attending/Rds or Learning CTR Multimedia (Heart Station)</td>
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<td>1:30 – 4:00 Consultation Svc Attending Rounds or Rehab Rounds</td>
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<td>1:30 – 4:00 M&amp;M</td>
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<td>1:30 – 4:00 Consult Attending Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No nights or weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Mini Student Presentation. Students should dress professionally: men should wear ties; white coats preferred.
ME210.02  CARDIOLOGY

Advanced Clinical Clerkship  Location: OVH  2006–2007  Revised: 12/7/05

COURSE CHAIR:  PHONE #:
Robin Wachsner, M.D.  (818) 364-4287

SUPPORTING FACULTY:
Drs. Robin Wachsner, Sheba Meymandi, Adel El Bialy, Anne Ichiju

STUDENT COORDINATOR:  PHONE #:
Mark DeVany  (818) 364-3205  E-MAIL: mdevany@ladhs.org

REPORT TO:
Mark DeVany, 14445 Olive View Dr., 2B 182 8:30 a.m.

PREREQUISITES:

AVAILABLE TO EXTERNs: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

DESCRIPTION: This cardiology clerkship at Olive View-UCLA Medical Center provides exposure to an extremely diverse patient population in both an inpatient and outpatient setting.

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. Pregnancy and Heart Disease
8. Preoperative eval. of patients w/ heart disease

INPATIENT: 70%
OUTPATIENT: 30%
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 WEEK BY STUDENT: 10 – 15

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 69 – 75

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 12:00 Consults (OVMC)</td>
<td>8:00 – 12:00 Cardio Clinic (OVMC) (Outpatient)</td>
<td>8:00 – 12:00 Consults (OVMC)</td>
<td>8:00 – 12:00 Consults (OVMC)</td>
<td>8:00 – 9:00 Journal Club</td>
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<td>12:00 – 1:00 Journal Club</td>
<td>1:00 – 5:00 Attending Consult Rnds (OVMC)</td>
<td>12:00 – 1:00 Hemodynamic Conf.</td>
<td>12:00 – 1:00 Journal Club</td>
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<td>1:00 – 3:00 Attending Consult Rnds (OVMC)</td>
<td>1:00 – 3:00 Attending Consult Rnds (OVMC)</td>
<td>1:00 – 4:00 Attending Consult Rnds (OVMC)</td>
<td>1:00 – 5:00 Attending Consult Rnds (OVMC)</td>
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<td>2:00 – 5:00 Attending Consult Rnds (OVMC)</td>
<td>2:00 – 5:00 Attending Consult Rnds (OVMC)</td>
<td>4:00 – 6:00 Cath Conf. (OVMC)</td>
<td>4:00 – 6:00 Cath Conf. (OVMC)</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No call or weekend requirements.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Oral presentations of clinical cases. (This is very much stressed).
ME210.03 CARDIOLOGY CONSULT

Advanced Clinical Clerkship Location: WVA 2006–2007 Revised: 12/05/05

COURSE CHAIR:  
Bramah Singh, M.D.  (310) 268-3646

PHONE:  

SUPPORTING FACULTY:  
Drs. Bersohn, Ebrahimi, Feliciano, Mody, Rubin, Singh, Toggart, Warner and Shapiro

STUDENT COORDINATOR:  
Susan Orrange  (310) 268-3646  E-MAIL: susan.orrange@med.va.gov

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

AVAILABLE TO EXTERNs: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: This course is designed to expose the students to common inpatient and outpatient consultative questions in cardiology. Basic understanding of the indications of various tests will be obtained. Students are encouraged to observe and may participate in the performance or interpretation of exercise stress testing, echocardiography and nuclear cardiology under supervision. Increased proficiency in EKG interpretation 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. Perioperative evaluation of cardiac patient

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 8

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

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></td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Patient Evaluation</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>12:00 Journal Club</td>
<td>Patient Evaluation</td>
<td>12:00 Medical Grand Rounds</td>
<td>Patient Evaluation</td>
<td>12:00 EKG/Echo/ Hemodynamic Conf.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Patient Evaluation</td>
<td>Patient Evaluation</td>
<td>EKG Interpretation</td>
<td>Cardiology New Patient</td>
</tr>
<tr>
<td></td>
<td>2:00 Nuclear Cardiology Reading</td>
<td>1:00 Echo Reading</td>
<td>Attending Rounds</td>
<td>3:00 Nuclear Cardiology Reading</td>
<td>Clinic</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4:00 Med-Surgery Cath Conference (optional)</td>
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<td></td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

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. A Student Core Curriculum is usually scheduled if more than three students on Cardiology Cardiac Intensive Care and Consult rotations.
### Course Information

**ME210.04 CARDIOLOGY**

**Advanced Clinical Clerkship**

**Location:** ST. MARY

**COURSE CHAIR:** Drs. C. Choi and D. DeCristofaro  
**PHONE #:** (562) 491-9350

**SUPPORTING FACULTY:**  
Drs. James Jengo, Alan Hermer, and Henry Van Gieson

**STUDENT COORDINATOR:** Sylvia Perez  
**PHONE #:** (562) 491-9350

**REPORT TO:** Department of Medical Education, 3 West, 1050 Linden Ave., Long Beach, CA 90813.

**AVAILABLE TO EXTERNS:** Yes

**PREREQUISITES:** Medicine

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

**DURATION:** 3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:** 2, 5, 8, 11, 14, 17, 27, 30, 33, 36, 39, 42, 45

**DESCRIPTION:** St. Mary Medical Center is a 400-bed community teaching hospital. The student will participate in the diagnostic and treatment decisions as a member of a combined consultative and ward team service. Students may be responsible for the initial consultation evaluation in conjunction with the supervising resident. Their findings and impressions would be presented to an attending cardiologist for recommendations. The team would also care for a number of ward cardiology patients, and the student would be responsible for daily notes, orders, and some procedures under the guidance and supervision of the residents and attending physicians. Students would have the opportunity to gain additional skills in EKG interpretation, physical diagnosis, and the management of common cardiac conditions. In addition they would be able to observe and learn about cardiac stress testing, echocardiography, cardiac catheterization procedures, and cardiac surgical procedures.

### Student Experiences

**COMMON PROBLEMS/DISEASES**

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

**CLOSE CONTACT WITH:**

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

**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:** 3

**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:** 6

### Typical Weekly Schedule

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>8:00 Morning Report</td>
<td>8:00 Basic EKG Course</td>
<td>8:00 Morning Report</td>
<td>7:30 Cardiac Cath</td>
<td>8:00 Morning Report</td>
</tr>
<tr>
<td></td>
<td>9:30 Work Rounds</td>
<td>9:00 Morning Report</td>
<td>8:30 Radiology Conf.</td>
<td>8:30 Cardiac Surge Conf.</td>
<td>9:30 Work Rounds</td>
</tr>
<tr>
<td></td>
<td>11:00 Attending TeachingRounds</td>
<td>10:00 Work Rounds</td>
<td>9:30 Work Rounds</td>
<td>9:00 Medical Clinic</td>
<td>11:00 Attending TeachingRounds</td>
</tr>
<tr>
<td>PM</td>
<td>12:30 Noon Conf.</td>
<td>12:30 Noon Conf.</td>
<td>12:30 Noon Conf.</td>
<td>12:30 Noon Conf.</td>
<td>12:30 Noon Conf.</td>
</tr>
<tr>
<td></td>
<td>1:00 Didactic Teaching</td>
<td>1:00 Didactic Teaching</td>
<td>1:00 Didactic Teaching</td>
<td>1:00 Didactic Teaching</td>
<td>1:00 Didactic Teaching</td>
</tr>
<tr>
<td></td>
<td>1:30 New Admits</td>
<td>1:30 New Admits</td>
<td>1:30 New Admits</td>
<td>1:30 New Admits</td>
<td>1:30 New Admits</td>
</tr>
<tr>
<td></td>
<td>2:00 Patient Care</td>
<td>2:00 Patient Care</td>
<td>2:00 Patient Care</td>
<td>2:00 Patient Care</td>
<td>2:00 Patient Care</td>
</tr>
<tr>
<td></td>
<td>3:00 EKG Conf.</td>
<td>3:00 Self-Studyf.</td>
<td>4:00 Sign out Rds</td>
<td>3:00 EKG Conf.</td>
<td>3:00 EKG Conf.</td>
</tr>
<tr>
<td></td>
<td>4:00 Sign out Rds</td>
<td>4:00 Sign out Rds</td>
<td>4:00 Sign out Rds</td>
<td>4:00 Sign out Rds</td>
<td>4:00 Sign out Rds</td>
</tr>
</tbody>
</table>

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

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** In addition, non-invasive cardiac testing (treadmill and other stress tests), reviews of echocardiograms, additional EKG teaching, and observation of cardiac catheterization or cardiac surgery are arranged as appropriate procedures and times are available.
COURSE CHAIR: Albert Shen, M.D.  
PHONE #: (323) 783-4516

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

STUDENT COORDINATOR: Steve Valencia  
PHONE #: (323) 783-4516  
E-MAIL: steve.m.valencia@kp.org

REPORT TO: Clerkship Coordinator, 4733 Sunset, 3rd Fl. Bldg. B,  
W. Mezz.at 8:30 a.m. Then report to CCU Team #3 at Hospital  
5th Flr, North Wing.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45

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 Dysrhythmias
7. Cardiomyopathy
8. Valvular Heart Disease

INPATIENT: 100%
OUTPATIENT: 0%
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 WEEK/STUDENT: 6

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

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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</thead>
<tbody>
<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 Conf.</td>
</tr>
<tr>
<td>9:00</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
</tr>
<tr>
<td>AM</td>
<td>Work Rounds/EKG</td>
<td>Work Rounds/EKG</td>
<td>Work Rounds/EKG</td>
<td>Work Rounds/EKG</td>
<td>Work Rounds/EKG</td>
</tr>
<tr>
<td>11:00</td>
<td>Cardiology Conf.</td>
<td>Echo Clinic Internal Medicine</td>
<td>Cardiology Conf. Treadmill Clinic</td>
<td>Patient Management Conference</td>
<td>Cardiology Surgical Conference</td>
</tr>
<tr>
<td>NOON</td>
<td></td>
<td>2:00 Education Conf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PM</td>
<td>Evaluate Old and New Patients</td>
<td>Evaluate Old and New Patients</td>
<td>Evaluate Old and New Patients</td>
<td>Evaluate Old and New Patients</td>
<td>Evaluate Old and New Patients</td>
</tr>
<tr>
<td>5:00</td>
<td>Sign-Out Rounds</td>
<td>Sign-Out Rounds</td>
<td>Sign-Out Rounds</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:
COURSE CHAIR:  PHONE #:  
Kalyanam Shivkumar, M.D. Ph.D.  (310) 206-2235

SUPPORTING FACULTY:  Noel G. Boyle M.D. Ph.D., David Cesario M.D. Ph.D., Miguel Valderrabano M.D., James Weiss M.D., John Child M.D. Isaac Wiener M.D., Jignesh Patel M.D. Ph.D.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Atrial arrhythmias
2. Ventricular arrhythmias
3. Congestive heart failure
4. Cardiomyopathies
5. Syncope
6. Congenital heart disease
7. Valvular heart disease
8. Pacemaker and ICD device patients

INPATIENT:  60%  
OUTPATIENT:  40%

CONSULTATION:  100%

PRIMARY CARE:  0%

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X RESIDENTS
X INTERNS
X OTHER – Nurse practitioners

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:  10

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

TYPICAL WEEKLY SCHEDULE

<table>
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<tbody>
<tr>
<td></td>
<td>12 – 1 PM Cardiology Core Curriculum Lecture</td>
<td>11 – 12 AM Consult Rounds</td>
<td>8.30 – 9.30 AM Medicine Grand Rds.</td>
<td>11 – 12 AM Consult Rounds</td>
<td>11 – 12 AM Consult Rounds</td>
</tr>
<tr>
<td></td>
<td>EP = Electrophysiology</td>
<td>9:30 – 12:00 Stress Testing &amp; Echo Lab</td>
<td>9:30 – 12:00 Stress Testing &amp; Echo Lab</td>
<td>12 – 1 PM Cardiology Journal Club</td>
<td>12 – 1 PM Cardiology Journal Club</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12 – 1 PM EP Lab Procedures</td>
<td>12 – 1 PM EP Lab Procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PM</td>
<td>1 – 5 PM Cardiology Clinic Dr Shivkumar</td>
<td>1 – 5 PM Pacemaker &amp; ICD Clinic Cardiology Clinic Dr Boyle</td>
<td>1 – 5 PM Cardiology Clinic Dr Cesario Congenital Heart Disease Clinic Dr. Child</td>
<td>1 – 5 PM Cardiology Clinic Dr Cesario Congenital Heart Disease Clinic Dr. Child</td>
<td>1 – 5 PM Cardiology Clinic Dr. Fujimura</td>
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<td></td>
<td>5 – 6 PM Cardiac Cath Conf.</td>
<td>5 – 6 PM Cardiac Cath Conf.</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  none

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Cardiology Clinics are in 200 Medical Plaza, Suite 265C, Pacemaker /ICD Clinics are in 200 Medical Plaza, Suite 330, Conferences are in FIFTH Floor Conference Room, on 5 East in Hospital
ME215.01 OUTPATIENT DERMATOLOGY

Advanced Clinical Clerkship Location: CHS

COURSE CHAIR: Jennifer Haley, M.D. (310) 794-4836

SUPPORTING FACULTY: Drs. Takahashi, Soriano, Ochoa, Young, Kim and Cotlier.

STUDENT COORDINATOR: Tapherine Devany (310) 825-5420 E-MAIL: tdevany@mednet.ucla.edu

REPORT TO: 200 Medical Plaza, Suite 450

PREREQUISITES: None

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: Dermatology 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, monthly Journal Clubs, Dermatopathology, and inpatient teaching rounds. Dermatologic surgery is an integral part of the program. Students will work with residents for patient work-up, will attend conferences and receive assigned readings. This is a “hands-on” elective.

COURSE 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.

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

CLOSE CONTACT WITH:

X FULL TIME FACULTY
X CLINICAL FACULTY
X RESIDENTS

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 375

TYPICAL WEEKLY SCHEDULE

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<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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<tbody>
<tr>
<td>AM</td>
<td>9:00–12 Dermatology Clinic</td>
<td>8:00 – 10:00 Grand Rounds</td>
<td>9:00–12:00 Dermatology Clinic</td>
<td>8:30–12:00 Derm Clinic</td>
<td>8:30 – 10:00 Slide Review</td>
</tr>
<tr>
<td></td>
<td>10:00 – 12:00 Dermatopathology Sign-Out</td>
<td></td>
<td></td>
<td></td>
<td>10:00 – 12:00 Dermatopathology Sign-Out</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 – 5:00 Dermatology Clinic</td>
<td>12:00 – 1:00 Conf./Slide Review Journal Club</td>
<td>1:00 – 4:00 Dermatology Clinic</td>
<td>1:30 – 5:00 Dermatology Clinic Surgery</td>
<td>1:30 – 5:00 Pediatric Dermatology Clinic</td>
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<tr>
<td></td>
<td></td>
<td>1:00 – 5:00 Dermatology Clinic</td>
<td></td>
<td>Cosmetic Clinic</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: RESEARCH ACTIVITIES: The Div. of Derm. is building a research program with 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 Dermatology.
ME215.04  DERMATOLOGY (CUTANEOUS MEDICINE)

Advanced Clinical Clerkship  Location: WVA  2006–2007  Revised: 12/20/05

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
William V.R. Shellow, M.D.  (310) 268-3153  1.  Familiarity with common skin diseases, including

SUPPORTING FACULTY:
William V.R. Shellow, M.D.

STUDENT COORDINATOR:
Debbie Chambers  PHONE #:  E-MAIL: debbie.chambers@med.va.gov
 (310) 268-3809

REPORT TO:  WLA VAMC Bldg. 500, Rm 1675 at 1:00 p.m. every Monday

PREREQUISITES:  Dermatology and Medicine

AVAILABLE TO EXTERNALS:  No

STUDENTS / PERIOD:  max 2  min 1

DURATION:  3  weeks

2006–2007  ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,36,39,42,45,48

DESCRIPTION:  The goal of this three-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, the student sees patients on his/her own.

STUDENT EXPERIENCES

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

INPATIENT:  0%  CLOSE CONTACT WITH:
OUTPATIENT:  100%  X  FULL TIME FACULTY
CONSULTATION:  60%  X  CLINICAL FACULTY
PRIMARY CARE:  40%  X  RESIDENTS

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  40
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  238

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 10:00 Grand Rounds 200 UCLA Med Plaza Derm Clinic Ste. 450 10:00 – 11:30 Lecture Series</td>
<td>1:00 – 4:30 Outpatient Clinic</td>
<td>8:30 – 12:00 Outpatient Clinic</td>
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<tr>
<td>PM</td>
<td>1:00 – 4:30 Outpatient Clinic</td>
<td>1:00 – 4:30 Outpatient Clinic</td>
<td>1:00 – 4:30 Outpatient Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME215.05  DERMATOLOGY

COURSE CHAIR:  A. Paul Kelly, M.D.  
PHONE #:  (310) 668-4578  
E-MAIL:  apkelly@cdrew.edu

SUPPORTING FACULTY:  
Drs. Marcia Glenn, Lori Hobbs, Darlene Sampson, Sanusi Umar and Dana Holl

STUDENT COORDINATOR:  Ms. Aban Kapadia  
PHONE #:  (310) 668-4578

REPORT TO:  MLK Hospital, Room #4016, 8:30 a.m.

PREREQUISITES:  None

AVAILABLE TO EXTERNS:  No

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 or 4 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  By Arrangement

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acne  
2. Warts  
3. Atopic Eczema  
4. Disorders of pigmentation  
5. Alopeia  
6. Viral Exanthems  
7. Fungus infections  
8. Collagen vascular diseases

INPATIENT:  10%  
OUTPATIENT:  90%  
CONSULTATION:  15%  
PRIMARY CARE:  85%

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

APPARENT # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  25

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  200

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:00 – 9:00 Residents Conf.  
      9:00 – 12:00 Adult Clinic (4I) | 8:15 – 10:00 UCLA Grand Rounds  
      10:30 – 12:00 Pathology/Indianer (Encino) | 8:00 – 9:00 Resident’s Surgical Conference  
      9:00 – 12:00 Adult Clinic (4I) | 8:00 – 9:00 Residents Conf.  
      9:00 – 12:00 Surgery Clinic (4I)  
      Moh’s Surgery 4th Thursday | 8:00 – 9:00 Clinical Slide Conference  
      9:00 – 12:00 Adult Clinic (4I) |
| PM   | 12:00 – 12:30 In-house Rounds  
      1:30 – 4:30 Pediatric Clinic (POP) | 1:00 – 4:00 Adult Clinic and Vitiligo Clinic (4I)  
      1:30 – 4:30 Surgery Clinic (1st Tues. cosmetic surgery; minor surgery 3rd, 5th Tuesdays) (Laser 2nd and 4th Tuesdays)  
      5:00 – 7:00 Derm Path – Dr. Chalet Wadsworth VA | 1:00 – 2:00 Journal Club  
      2:00 – 3:30 Mycology Lecture | 1:00 – 2:00 Inhouse Rounds |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None (1 resident takes call via long-range beeper)

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE 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.

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

CLOSE CONTACT WITH:

<table>
<thead>
<tr>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>5%</td>
<td>95%</td>
<td>40%</td>
<td>60%</td>
</tr>
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</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 150

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
<th>Monday</th>
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<th>Thursday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>7:00 – 12:00 Derm Surgery Clinic and MOHS Surgery</td>
<td>7:00 – 8:00 MOHS Surgery</td>
<td>7:00 – 12:00 MOHS Surgery/Laser Surgery</td>
<td>7:00 – 12:00 MOHS Surgery/Laser Surgery</td>
<td>7:00 – 11:00 Derm Surgery Clinic and MOHS Surgery</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8:00 – 10:00 Grand Rounds</td>
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<td>10:00 – 12:00 MOHS Surgery</td>
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<tr>
<td>PM</td>
<td>1:30 – 5:00 Derm Surgery Clinic</td>
<td>1:00 – 5:00 MOHS Surgery</td>
<td>1:00 – 5:00 (same as Thursday) and Laser Surgery</td>
<td>1:00 – 5:00 MOHS Surgery, Cosmetic Dermatology, Resident Surgery Clinic</td>
<td>1:00 – 5:00 Cosmetic Dermatology Clinic</td>
</tr>
</tbody>
</table>

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

Advanced Clinical Clerkship  Location: ASSOC  2006–2007  Revised: 11/28/05

COURSE CHAIR:  PHONE #:  
Stuart L. Shear, M.D.  (213) 481-2982

COURSE OBJECTIVES (in order of importance)
1. Common sense medical judgment in evaluating and diagnosing dermatology patients.
2. Familiarity with benign and malignant skin tumors and their diagnosis and treatment (i.e., basal cell, squamous cell, melanoma, epidermal cysts).
3. Familiarity with laboratory diagnostics (woods lamp, Koh, Tzank Smears).
4. Learn to take a dermatology history and its importance in diagnosis.

SUPPORTING FACULTY:

STUDENT COORDINATOR:  PHONE #:  
Stuart L. Shear, M.D.  (213) 481-2982
FAX:  (213) 481-2560

REPORT TO:  1245 Wilshire Blvd., #907, LA  90017-4809 at 9:30 a.m.

PREREQUISITES: None

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 2 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
By Arrangement

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acne
2. Rosacea
3. Seborrhea
4. Viral exanthems
5. Basal cell
6. Squamous cell
7. Melanoma
8. Epidermal cysts

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

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

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

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<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>
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<tr>
<td>PM</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>
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<td></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 for $1.00 per day in Good Samaritan parking lot to be designated.  2.) Occasional meals are provided free, on other days can be purchased in hospital.
ME215.08 GENERAL DERMATOLOGY

Advanced Clinical Clerkship Location: HARBOR 2005-2006 Revised: 1/3/06

COURSE CHAIR:  PHONE #:  
Noah Craft, M.D. Ph.D.  (310) 222-8011

SUPPORTING FACULTY:  
Michael Kolodney, M.D. Ph.D.

STUDENT COORDINATOR:  PHONE #:  
Kathleen McGinley  (310) 222-2409
E-MAIL:  kmcginley@ladhs.org

REPORT TO:  Dr. Craft @ 9:00 a.m., Bldg. E6, Room 145

PREREQUISITES:  
Inpatient Medicine, Ambulatory Medicine,
Surgery and Pediatrics

AVAILABLE TO EXTERNS:  Yes

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Psoriasis
2. Atopic dermatitis
3. Nevi
4. Basal Cell Carcinoma
5. Actinic Keratoses
6. Squamous Cell Carcinoma
7. Tinea corporis
8. Contact dermatitis

STUDENT COORDINATOR:  PHONE #:  
Kathleen McGinley  (310) 222-2409
E-MAIL:  kmcginley@ladhs.org

DESCRIPTION:  General Dermatology at Harbor UCLA is focused primarily on medical dermatology in an outpatient setting. Students will attend 6 outpatient clinics per week and as appropriate, will evaluate and treat patients under the supervision of the attending physician. Common skin conditions such as psoriasis, eczema, nevi, skin cancer, and fungal infections are seen daily. Students will also evaluate inpatients as part of the dermatology team during inpatient consultations at Harbor-UCLA. Focus will be placed on understanding basic pathogenesis of skin disease and diagnosis and treatment of common dermatologic conditions in a county hospital system, where disease progression is occasionally more advanced. This experience will be supplemented by attending the outpatient dermatology clinics at Long Beach Memorial, where patients typically present earlier in the course of a disease. Both of these settings include care of pediatric, adult, and geriatric patients with varied skin conditions. There will be limited discussion of cosmetic dermatology in these settings.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Psoriasis
2. Atopic dermatitis
3. Nevi
4. Basal Cell Carcinoma
5. Actinic Keratoses
6. Squamous Cell Carcinoma
7. Tinea corporis
8. Contact dermatitis

INPATIENT:  5%
OUTPATIENT:  95%
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 WEEK/STUDENT:  20
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  380

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 Dermatopathology Conf.</td>
<td>Clinical Kodachrome Review with Chief Resident</td>
<td>Harbor-UCLA Dermatology Clinic</td>
<td>Harbor-UCLA Dermatology Clinic</td>
<td>Clinical Dermatology Kodachrome Review with faculty</td>
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<td></td>
<td>9:00 – noon Dermatopathology slide sign-out</td>
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<tr>
<td>PM</td>
<td>Venice Family Clinic Dermatology Clinic (evening 5:00 – 8:00)</td>
<td>Harbor-UCLA Dermatology Clinic</td>
<td>Long Beach Memorial Dermatology Clinic</td>
<td>Long Beach Memorial Dermatology Clinic</td>
<td>Harbor-UCLA Dermatology Clinic</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  There will be opportunity for exposure to basic science dermatology research during the independent study periods of the rotation. Students will be required to present a brief discussion on the topic of their choosing at the completion of the course.
COURSE 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
4. Thyroid cancer
5. Hypothyroidism
6. Bone metabolic disorders
7. Adrenal disorders
8. Pituitary tumors
9. Hypogonadism
10. PCOS
11. Metabolic Syndrome
12. Hyperlipidemia

INPATIENT: 25%
OUTPATIENT: 75%
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 WEEK/STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 75

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Clinic with Dr. Chopra</td>
<td>Clinic with Dr. Sadher</td>
<td>8:30 – 9:30 Medical Grand Rounds 9:30 am Clinic with Dr. Martinez</td>
<td>Clinic with Dr. Korenman</td>
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<td></td>
<td>1st Week Endocrine Diagnostic Procedure with John Timmons 2nd Week With Diabetic Educator, Elle G. 3rd Week Lipid Disorders with Dr. Watson</td>
<td>1st, 2nd and 3rd Week Santa Monica Endocrine Clinic</td>
<td>Clinic with Dr. Butler/Hershmann/Hahn</td>
<td>Clinic with Dr. Bryer-Ash</td>
<td>1st Week Diabetes nutrition with Shiri</td>
</tr>
<tr>
<td>PM</td>
<td>1st Week Endocrine Diagnostic Procedure with John Timmons 2nd Week With Diabetic Educator, Elle G. 3rd Week Lipid Disorders with Dr. Watson</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

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

1. Knowledge of common pituitary-hypothalamic, thyroid, adrenal, parathyroid, bone, metabolic, 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, bone, 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 sugar levels.
5. Knowledge of types, indications, contraindications, and adverse effects of various drugs, including thyroid hormones, glucocorticoids, androgens, estrogens, vitamin D, and insulin, and oral antihyperglycemic agents.
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 and one grand round 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
2. Hypothyroidism
3. Hypercalcemia
4. Hyperthyroidism
5. Hyponatremia
6. Hypernatremia
7. Pituitary tumors
8. Hypertension
9. Diabetes
10. Amenorrhea
11. Infertility
12. Hyperparathyroidism
13. Hypoparathyroidism
14. Lipid abnormalities
15. Metabolic bone disease
16. Osteoporosis
17. Cushing’s syndrome
18. Addison’s disease

INPATIENT: 20%
OUTPATIENT: 80%
CONSULTATION: 80%
PRIMARY CARE: 20%
CLOSEx FULL TIME FACULTY
CLINICAL FACULTY
FELLOWS
RESIDENTS
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 4 – 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:30 – 10:30 Consultation and</td>
<td>8:00 – 9:00 Endocrine Grand</td>
<td>9:00 – 12:00 Diabetes Outpatients</td>
<td>8:00 – 9:00 Diabetes Lecture</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
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<td></td>
<td>Follow-up</td>
<td>Rounds</td>
<td>Clinic (DOTEC)</td>
<td>Endocrine/Diabetes Journal Club</td>
<td>9:00 – 12:00 Faculty Attending</td>
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<td>10:30 – 12:00 Faculty Attending</td>
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<td>Rounds</td>
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<td></td>
<td>Rounds</td>
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<tr>
<td>PM</td>
<td>2:00 – 5:00 Lecture Series</td>
<td>1:00 – 2:00 Consultations &amp;</td>
<td>1:00 – 5:00 Harbor Endocrine</td>
<td>1:00 – 5:00 Diabetes Management</td>
<td>12:00 – 1:00 Endocrine Research</td>
</tr>
<tr>
<td></td>
<td>Androgen-Related Disorders</td>
<td>Follow-up</td>
<td>Clinic</td>
<td>Conference</td>
<td>Seminar</td>
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<td>Inservices</td>
<td>Diabetes Clinic (CS)</td>
<td>1:00 – 2:00 Pathology Conference</td>
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<td>Insulin Rounds with</td>
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<td></td>
<td>Fellow</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Consults and Rounding on In-house patients.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will have the opportunity to work in the diabetes basic science laboratory in the afternoons.
COURSE 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 adherence & satisfaction

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 5 – 6

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 50 – 63

TYPICAL WEEKLY SCHEDULE

<table>
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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:30</td>
<td>8:30</td>
<td>10:00</td>
<td>1:00</td>
<td>8:30</td>
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<tr>
<td></td>
<td>Pituitary or Thyroid Nodule Clinic</td>
<td>Medicine Grand Rounds</td>
<td>Review of Thyroid Biopsies or Nuclear Medicine Rounds</td>
<td>Chart Check</td>
<td>Diabetes &amp; Metabolism Clinic</td>
</tr>
<tr>
<td>PM</td>
<td>2:00</td>
<td>12:00</td>
<td>12:00</td>
<td>2:00</td>
<td>3:30</td>
</tr>
<tr>
<td></td>
<td>Attending Rounds</td>
<td>Basic Science Seminar Lecture Series</td>
<td>Endocrine Clinical Conference</td>
<td>Endocrine Clinic</td>
<td>Attending Rounds</td>
</tr>
</tbody>
</table>

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.
COURSE 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: This 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 house staff on the in-patient 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. Hyperthyroidism
4. Hypercalcemia
5. Metabolic bone disease
6. Pituitary disorders
7. Hyperlipidemia

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 8

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

TYPICAL WEEKLY SCHEDULE

<table>
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<th>Hour</th>
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<th>Tuesday</th>
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</thead>
<tbody>
<tr>
<td>AM</td>
<td>Hospital Rounds</td>
<td>Patient Workups</td>
<td>8:00 – 9:00 Practical Diabetes Conference</td>
<td>Lipid Clinic 1st and 3rd Thursday</td>
<td>8:00 – 9:00 Endocrine Grand Rounds</td>
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<td>9:00 – 12:00 Diabetes Clinic</td>
<td>Gyn Endo Clinic 2nd Thursday</td>
<td>9:00 – 12:00 Endocrine Clinic</td>
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<tr>
<td>PM</td>
<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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<td></td>
<td>Hospital Rounds</td>
<td>12:00 – 1:00 4th Thursday Journal Club</td>
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</table>

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.
ME226.03 CLINICAL NUTRITION

Advanced Clinical Clerkship Location: CHS Revised: 11/29/05

COURSE CHAIR: PHONE #: COURSE OBJECTIVES (in order of importance)
David Heber, M.D., Ph.D. (310) 206-1987
Zhaoping Li, M.D., Ph.D.

SUPPORTING FACULTY:

Kurt Hong, M.D.

STUDENT COORDINATOR: PHONE #: E-MAIL: sbowerman@mednet.ucla.edu
Susan J. Bowerman, M.S., R.D. (310) 206-3912

REPORT TO: 200 Medical Plaza Suite 365—Per Schedule Below Confirm with Susan Bowerman.

PREREQUISITES: Medicine, Surgery and Pediatrics

AVAILABLE TO EXTERN: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
By Arrangement

DESCRIPTION: This course provides an intensive exposure to outpatient nutrition in an ambulatory setting, preparing students to integrate nutrition therapy into their clinical practice for the prevention and treatment of common chronic diseases, with emphasis on obesity. There is also experience with a multidisciplinary nutrition team in the University Obesity Center and didactic instruction with clinical fellows at the Center for Human Nutrition

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>0%</td>
<td>100%</td>
<td>100%</td>
<td>0%</td>
<td>X FULL TIME FACULTY</td>
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<tr>
<td>Diabetes</td>
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<td>X CLINICAL FACULTY</td>
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<tr>
<td>Cancer</td>
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<td>X FELLOWS</td>
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<td>Hyperlipidemia</td>
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<td>X RESIDENTS</td>
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<td>Gastrointestinal diseases</td>
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<td>X INTERNS</td>
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<td>Cardiovascular diseases</td>
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<td>X OTHER Clinical Dietitians</td>
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<tr>
<td>Renal disease</td>
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<tr>
<td>Eating disorders</td>
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APPRAOCH # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

<table>
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<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Independent Study*</td>
<td>10:00 – 12:00 Didactic Teaching - Nutritional Supplements Staff</td>
<td>9:00 – 11:00 Didactic Teaching – Obesity and Cancer Staff</td>
<td>8:30 – 12:30 Nutrition Medicine Clinic 200 Med Plaza Suite 365</td>
</tr>
<tr>
<td></td>
<td>Dr. Kurt Hong</td>
<td>Dr. Zhaoping Li</td>
<td>Dr. Luigi Gratton</td>
<td></td>
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<tr>
<td>PM</td>
<td>1:00 – 5:00 Nutrition Medicine Clinic 200 Med Plaza Suite 365</td>
<td>1:00 – 5:00 Nutrition Medicine Clinic 200 Med Plaza Suite 365</td>
<td>1:00 – 5:00 Nutrition Medicine Clinic 200 Med Plaza Suite 365</td>
<td>12:00 – 2:00 Journal Club Warren Hall</td>
</tr>
<tr>
<td></td>
<td>Mr. Joe Walker; Staff</td>
<td>Mr. Joe Walker; Staff</td>
<td>Mr. Joe Walker; Staff</td>
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ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Each student will be expected to prepare a short paper on a nutrition topic of their choice and present at the Journal club. *Independent study time is used to research and write 7-10 page paper on a nutrition topic approved by Course Chair and to prepare presentation on topic to Friday Research Conference, and to read peer-reviewed journal articles supplied by the Course Chair

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Attendance at one Saturday morning University Obesity Center Clinic is required during the rotation.
ME230.01 GASTROENTEROLOGY AND HEPATOLOGY

Advanced Clinical Clerkship
Location: CHS
2006–2007
Revised: 12/7/05

COURSE CHAIR:
Terri Getzug, M.D.
PHONE #:
(310) 794-1700

SUPPORTING FACULTY:
G.I. and Hepatology Faculty

STUDENT COORDINATOR:
Sandra Fuller
PHONE #:
(310) 794-6326
E-MAIL: sfuller@mednet.ucla.edu

REPORT TO:
200 UCLA Medical Plaza, Suite 365A at 8:00 a.m.
(contact Sandra Fuller)

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1
DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: Students will act as gastroenterology consultants in both outpatient gastroenterology and hepatology clinics and inpatient consult services just as medical residents; however, with closer supervision by Fellows and Attending Physicians. About 5–10 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 Digestive Diseases.

STUDENT EXPERIENCES

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

INPATIENT:
OUTPATIENT:
CONSULTATION:
PRIMARY CARE:

COURSE OBJECTIVES (in order of importance)
1. Knowledge of the pathogenesis and natural history, the disorderly investigation, differential diagnosis and management of diarrhea, inflammatory bowel disease, peptic ulcer disease, GI bleeding, 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.
7. Oral presentations of clinical cases.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 75

TYPICAL WEEKLY SCHEDULE—INPATIENT SERVICE

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<tbody>
<tr>
<td>AM</td>
<td>GI Clinic</td>
<td>Patient Consultation and/or GI Procedures</td>
<td>Medical Grand Rnds Patient Consultation and/or GI Procedures</td>
<td>Patient Consultation and/or GI Procedures/FMF Clinic**</td>
<td>Basic Science Seminar (WVA) Patient Consultation and/or GI Procedures</td>
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</table>

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 two 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.
ME230.02 GASTROENTEROLOGY

Advanced Clinical Clerkship  Location: CS  2006–2007

COURSE CHAIR:  Andrew Ippoliti, M.D.

SUPPORTING FACULTY:  

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

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

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

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.

STUDENT EXPERIENCES

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

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 WEEK BY STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:30 – 12:00 Gi Outpatient Clinic</td>
<td>7:30 – 8:30 Liver Conference</td>
<td>8:30 – 12:00 Gi Rounds</td>
<td>8:30 – 9:30 Gi Conference (Path, Radiol, Clinical)</td>
<td>8:00 – 10:00 Fellows GI Core Curriculum (VA Wadsworth)</td>
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<td>8:30 – 10:30 Gi Rounds and GI Topics</td>
<td>9:30 – 12:00 Gi Rounds and GI Topics</td>
<td>9:30 – 12:00 Medical Grand Rounds</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
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<td>10:30 – 12:00 MST Rounds</td>
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<td>10:30 – 12:00 MST Rounds</td>
<td>10:30 – 12:00 MST Rounds</td>
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<td>12:00 – 1:00 GI Fellows Endoscopy</td>
<td>12:30 – 3:30 GI Fellows Endoscopy</td>
<td>12:00 – 1:00 Journal Club 2nd Tuesday</td>
<td>1:00 – 2:00 GI Voluntary Attending Rounds</td>
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<td>1:00 – 5:00 HEP Outpatient Clinic (if not in Continuity Clinic)</td>
<td>12:30 – 1:30 IBP Conference</td>
<td>1:00 – 5:00 Motility Outpatient Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

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

SUPPORTING FACULTY:  
Drs. David Chung and Binh Pham

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

REPORT TO: Harbor-UCLA Medical Center, N21 at 8:30 a.m.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNs: Yes

STUDENTS / PERIOD: max 3  min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: This course is an introduction to gastrointestinal and liver diseases. Students will perform consultations, discuss patients at rounds, have didactic sessions and will be able to observe GI disorders.

COURSE 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.

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
9. GI motility disorders

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 WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

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</table>
| AM   | 8:00 – 12:00 GI Clinic  
1:00 – 4:00 IBD Pancreas/Biliary/Hepatology Clinic | 8:30 – 10:00 Medical Grand Rounds | 7:45 – 8:45 Journal Club | 12:00 – 1:00 M & M Conference  
3:00 – 4:30 Consultation Rounds  
4:30 – 5:30 GI Pathology Conf. | 11:00 – 12:00 GI Review Course |
| PM   | 3:00 – 5:00 Consultation Rounds | 2:00 – 4:00 Consultation Rounds | 2:00 – 4:00 Clinical Attending Rounds | |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME230.04  GASTROENTEROLOGY

Advanced Clinical Clerkship Location: KAISER.SUN 2005 - 2006
Revised: 11/28/05

COURSE CHAIR: PHONE #:
Harpreet Sekhom, M.D. (323) 783-3799
Alan Sheinbaum, M.D. (323) 783-1028

SUPPORTING FACULTY:
Gastroenterology Faculty

STUDENT COORDINATOR: PHONE #:
Steve Valencia (323) 783-4516
E-MAIL: steve.m.valencia@kp.org

REPORT TO: Clerkship Coordinator, Center for Medical Education, 4733 Sunset 3rd Floor @ 8:30 a.m.

PREREQUISITES:
Internal Medicine and Surgery

AVAILABLE TO EXTERNS:
Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2005 - 2006 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: Students will be gastroenterology and hepatology consultants in both outpatient and inpatient settings. The role will be essentially similar to a resident, but with much closer supervision. The student will work under the tutelage of residents, fellows and staff. Patients will be assigned to the student for evaluation and follow-up. The amount of patients assigned will be based on the experience and capability of the student. The load will be enough to gain a meaningful experience in the rotation, but not so much as to inundate the student at the expense of learning. Common diseases seen include GI bleeding, pancreatitis, jaundice, inflammatory bowel disease, diarrhea, GI malignancy, abdominal pain. In a typical week, the medical students will see 5 new consults.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES INPATIENT: 90%
1. GI bleeding/peptic ulcer disease
2. Pancreatitis
3. Liver disorders/jaundice
4. Pre and post-liver transplant
5. Inflammatory bowel disease
6. Abdominal pain/diarrhea
7. GI malignancy
8. Functional bowel disease

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5 - 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 100 - 120

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 - 12:00 Work Rounds</td>
<td>8:00 - 12:00 Work Rounds</td>
<td>8:00 - 12:00 GI or Liver outpatient clinic</td>
<td>8:00 - 12:00 Work Rounds</td>
<td>8:00 - 12:00 Work Rounds</td>
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<tr>
<td>PM</td>
<td>1:00 - 3:00 Attending Rounds</td>
<td>1:00 - 3:00 Attending Rounds</td>
<td>12:00 - 1:00 GI Journal Club</td>
<td>12:00 - 1:30 GI Grand Rounds</td>
<td>1:00 - 3:00 Attending Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME230.06  GASTROENTEROLOGY

Advanced Clinical Clerkship  Location: OVH  2006–2007  Revised: 11/2/06

COURSE CHAIR:  PHONE #:  
Stanley Dea, M.D.  (818) 364-3205

SUPPORTING FACULTY:

STUDENT COORDINATOR:  PHONE #:  
Mark DeVany  (818) 364-3205  
E-MAIL: mdevany@ladhs.org

REPORT TO:  OVMC, Room 2B-182, 14445 Olive View Dr., Sylmar, CA 91342 (8:00 a.m.)

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNALS:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
By Arrangement

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.

COURSE 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 critically read the medical literature (vehicle: review of specific articles for journal club).

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  IP/OP/CONS/PrimaryCare
1. Peptic ulcer disease  50%  50%  100%  0%
2. Gastrointestinal bleeding
3. Cirrhosis
4. Functional bowel disease
5. Pancreatitis
6. Jaundice
7. GI cancer
8. Hepatitis

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  8 – 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  38 – 50

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>GI Clinic Olive View</td>
<td>Inpatient Consultations</td>
<td>Inpatient Consultations</td>
<td>Inpatient Consultations</td>
<td>GI Basic Science Seminar (WLA VA) or Minilectures (OV) Inpatient Consultations Library</td>
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<td>Endoscopy</td>
<td>Endoscopy</td>
<td>Endoscopy Library</td>
<td>Endoscopy Library</td>
<td>Inpatient Consultations Library</td>
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<tr>
<td>PM</td>
<td>Inpatient Consultations</td>
<td>Noon Conf. OV</td>
<td>Noon Conf. OV</td>
<td>Noon Conf. OV (Med-Surg 2nd/4th)</td>
<td>Inpatient Consultations</td>
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<td>Inpatient Rounds OV</td>
<td>Inpatient Consultations</td>
<td>Inpatient Consultation</td>
<td>Inpatient Consultations</td>
<td>Inpatient Rounds OV</td>
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<td>Library</td>
<td>GI Path Conf. OV</td>
<td>Library</td>
<td>Library</td>
<td>Inpatient Rounds OV</td>
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<td>GI Journal Club</td>
<td>Inpatient Rounds OV</td>
<td>Inpatient Rounds OV</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.
ME240.01  HEMATOLOGY/ONCOLOGY

Advanced Clinical Clerkship Location: CS 2006–2007 Revised: 12/12/05

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

SUPPORTING FACULTY:  Drs. Michael Lill and Stephen Lee

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

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

PREREQUISITES:  Medicine

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

DESCRIPTION: Designed for fourth-year students with an interest in Hematology/Oncology.

COURSE 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.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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<td>Work Rounds on Wards</td>
<td>Hem./Onc. Grand Rounds</td>
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<td>Clinic</td>
<td>Attending Rounds</td>
<td>Morph/Clin Path</td>
<td>Attending Rounds</td>
<td>Grand Rounds</td>
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<td>Noon Conference</td>
<td>Multidisciplinary Cancer Conference</td>
<td>Tumor Board</td>
<td>Noon Conference</td>
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<td>Hem./Onc. Lectures</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE 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.
13. Develop consultative skills with other physicians.

DESCRIPTION:
This elective will consist of a 7 days Inpatient Consult and 8 days of Inpatient Clinical bone marrow transplant. This service will consist of general training in adult Hematology-Oncology as it applies to the workup of disorders of coagulation, cytopenias, bone marrow disorders, and oncologic problems for which consultative support is requested.

TYPICAL WEEKLY SCHEDULE

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.
ME240.03 CLINICAL HEMATOLOGY/ONCOLOGY

Advanced Clinical Clerkship
Location: HARBOR
2006–2007
Revised: 11/28/05

COURSE CHAIR:
Maria Dungo, M.D.
(310) 222-2217

PHONE #: SUPPORTING FACULTY:
K.R. Tanaka, M.D., R.T. Chlebowski, M.D., Ph.D., H. Yang, M.D.

STUDENT COORDINATOR:
Valerie Cooray
(310) 222-2217
E-MAIL: vcooray@rei.edu

REPORT TO: Maria Dungo, M.D., Dept. H. Harbor-UCLA
Research & Education Institute, Bldg. J3, Room 12, 9:00 a.m.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNs: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

COURSE OBJECTIVES (in order of importance)
1. Increase knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of the commonly seen hematologic and oncologic disorders. These include anemia, thrombocytopenia and hemorrhagic disorders, breast, lung and colon cancer, 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 and oncologic disorders.
9. Library research and interpretation of hematologic and oncologic literature.

DESCRIPTION:
The Hematology/Medical Oncology Service at Harbor-UCLA Medical Center is a consultative service for the entire hospital, except Pediatrics. A large variety of hematologic and oncologic disorders are seen. Emphasis is placed on clinical evaluation of hematologic and oncologic disorders and various teaching aids such as slide sets and self-assessment examinations are available. While on the Hematology/Medical Oncology Service, students will be under the immediate supervision of the Clinical Hematology/Medical Oncology Fellow. Students will present cases at Team Rounds and Hematology Grand Rounds, participate in the Hematology and the Medical Oncology Clinics, 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 and lymphomas
7. Cancer of breast, lung, and colon
8. Elevated hematocrits

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

APPROMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 12:00 Ward Consults</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>7:30 – 8:15 Heme Seminar</td>
<td>9:00 – 10:00 Oncology Seminar</td>
<td>8:00 – 12:00 Oncology Clinic</td>
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<td>8:30 – 9:30 Chief’s Rounds</td>
<td>9:30 – 12:00 Bone Marrow Clinic Oncology Clinic</td>
<td>8:15 – 12:00 Hematology Clinic</td>
<td>10:00 – 12:00 Oncology/Hematology Rounds</td>
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<td>10:30-12:00 Consult Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Medical Lecture Series</td>
<td>12:30 – 1:30 Breast Tumor Board</td>
<td>12:00 – 1:00 General Tumor Board</td>
<td>12:00 – 1:00 Morbidity &amp; Mortality Conference</td>
<td>1:00 – 3:00 Ward Consults</td>
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<td>1:00 – 5:00 Ward Consults</td>
<td>1:30 – 2:30 Heme Slides</td>
<td>1:00 – 3:00 Ward Consults</td>
<td>1:30 – 3:00 Hematology Grand Rounds</td>
<td>3:00 – 5:00 Ward Consults</td>
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<td>2:30 – 5:00 Ward Consults</td>
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<td>3:00 – 5:00 Hematology Teaching Rounnds</td>
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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.
ME240.05 CLINICAL HEMATOLOGY-ONCOLOGY

Advanced Clinical Clerkship Location: OVH

Revised: 12/08/05

COURSE CHAIR:
Nancy Feldman, M.D. (818) 364-3205

SUPPORTING FACULTY:
Drs. Nancy Feldman, Lauren Pinter-Brown, Leland Powell

STUDENT COORDINATOR:
Mark DeVany (818) 364-3205 E-MAIL: mdevany@ladhs.org

REPORT TO: OVMC, Room 2B-182, 14445 Olive View Dr., Sylmar, CA 91342 (8:00 a.m.)

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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 out-patient 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. Focused literature research and faculty tutorial on single topic selected by student(s).
11. Diagnosis and management of common oncologic emergencies, e.g., neutropenic sepsis, hypercalcemia, cord compression syndrome.

DESCRIPTION: The student will participate on the Hematology/Oncology consult service at primarily OVMC. This will include the work-up 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: 70%
PRIMARY CARE: 30%

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5 – 8
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 30

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
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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 at OVMC</td>
<td>8:30 Consultations Rounds</td>
<td>Consultations Procedures</td>
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<td></td>
<td>Journal Club (q.Month)</td>
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<td>Hematopathology Rounds</td>
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<tr>
<td>PM</td>
<td>1:00 Hematology Clinic at OVMC</td>
<td>Rounds Consultations</td>
<td>Clinic OVMC</td>
<td>1:15 Tumor Board at OVMC (weekly)</td>
<td>Work Rounds Consultations</td>
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<td>Work Rounds Consultations No Overnight Call</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME245.01  INFECTIOUS DISEASES

Advanced Clinical Clerkship  Location: CHS  2006–2007  Revised: 11/28/05

COURSE CHAIR:  
Bernard M. Kubak, M.D., Ph.D.  Director (310) 825-7225

SUPPORTING FACULTY: 

STUDENT COORDINATORS: 
Nansi Tadros & Ricky Tristan  (310) 825-7225  
E-MAIL: ntadros@mednet.ucla.edu & rtristan@mednet.ucla.edu

REPORT TO: 
Nansi or Ricky, 8 a.m., Call one week in advance or e-mail ntadros@mednet.ucla.edu

PREREQUISITES:  Medicine, Surgery, Pediatrics, and Ob/Gyn

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 2-3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
By Arrangement

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

COURSE 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.

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: 0%

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

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 4 – 28 patients

TYPICAL WEEKLY SCHEDULE  DAILY ROUNDS

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<tr>
<td>AM</td>
<td>8:00 – 12:00 Rounds</td>
<td>8:00 – 12:00 Rounds</td>
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<td>8:00 – 12:00 Rounds</td>
<td>8:00 – 12:00 Rounds</td>
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<tr>
<td>PM</td>
<td>1:00 – 2:00 Lecture Series</td>
<td>2:00 – 5:00 Rounds</td>
<td>2:00 – 5:00 Rounds</td>
<td>2:00 – 5:00 Rounds</td>
<td>5:00 – 6:00 Conference</td>
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<td>2:00 – 5:00 Rounds</td>
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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 and 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, and accommodations. Students are welcome BUT MUST coordinate individually with faculty.
COURSE 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, chemo-prophylaxis 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: The purpose of this clerkship is to introduce the student to the most contemporary approaches for the prevention and management of infectious diseases, both in concept and practice.

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
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:30 – 10:30 Intake Rounds</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>8:00 – 12:00 AIDS Clinic</td>
<td>8:00 – 12:00 AIDS Clinic</td>
<td>8:30 – 9:30 Student/Resident Topic Session</td>
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<td>9:00 – 12:00 I.D. Clinic</td>
<td>9:30 – 10:30 I.D. Clinic</td>
<td>9:30 – 10:30 I.D. Clinic</td>
<td>9:30 – 10:30 Intake Rounds</td>
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<td>10:00 – 11:00 Intake Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Medicine Lect. Series</td>
<td>1:30 – 3:00 Teaching Rounds</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>1:00 – 5:00 AIDS Clinic</td>
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<td>4:30 – 5:30 ID Diactic Course</td>
<td>1:30 – 3:30 (1st &amp; 3rd Fridays) Adult ID Rounds</td>
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<td>1:30 – 5:00 I.D. Teaching Rounds</td>
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<td>1:30 – 2:30 Peds/ID Combined Conference</td>
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<td>2:00 – 3:15 Chest I.D. Combined Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Service gives students higher than average responsibility for providing patient consultative services.
COURSE OBJECTIVES (in order of importance)

1. Learn to evaluate patients 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.

PREREQUISITES: Must have completed 3rd year

AVAILABLE TO EXTERN: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 4 weeks

2005–2006 ROTATIONS BEGIN WEEK:
By Arrangement

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. Ostemyelitis
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
FELLOWS
X RESIDENTS
X INTERNS
X OTHER Pharmacists, Respiratory therapists

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 8

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 Morning Report</td>
<td>8:00 Morning Report</td>
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<td>8:30 Infectious Disease Clinic—TB Clinic</td>
<td>10:00 Consult Rounds</td>
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<td>10:00 Consult Rounds</td>
<td>10:30 Teaching Rounds</td>
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<td>PM</td>
<td>12:00 Medicine Conf.</td>
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<td>1:00 Consultation</td>
<td>1:00 Consultation</td>
<td>1:00 Micro Rounds</td>
<td>1:00 Micro Rounds</td>
<td>1:00 Consultation</td>
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<td>3:00 Teaching Rounds</td>
<td>3:00 Teaching Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: IMPORTANT NOTE: Students must bring TB skin test or chest x-ray documentation 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; 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

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

SUPPORTING FACULTY: 
Drs. Suzanne Donovan, Glenn Mathisen, and Arthur Jeng

STUDENT COORDINATOR:  PHONE #:  
Mark Devany  (818) 364-3205  
E-MAIL: mdevany@ladhs.org

REPORT TO:  
Mark Devany, Room 2B-182, 8:00 a.m.

PREREQUISITES:  Medicine

AVAILABE TO EXTERN:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007  ROTATIONS BEGIN WEEKS: 
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

COURSE 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 provide 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  INPATIENT:  90%
2. Sepsis  OUTPATIENT:  10%
3. Tuberculosis  CONSULTATION:  90%
4. AIDS  PRIMARY CARE:  10%
5. Fungal disease  
6. Parasitic disease  
7. Hospital Acquired Infection  

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 WEEK BY STUDENT:  5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 – 10:00 Journal Club and 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 See Consults</td>
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<td>9:30 – 1:00 See Consults</td>
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<tr>
<td>PM</td>
<td>1:30 – 5:00 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.
COURSE 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.

LOCATION:  WVA
2006–2007
Revised: 11/28/05

ME245.05 INFECTIOUS DISEASES
STUDENT COORDINATOR: PHONE #:
Geri Gooden (310) 268-3015
E-MAIL: gerald.gooden@va.gov

REPORT TO: Infectious Disease Division Office, Bldg. 500, Room 4669, West LA VA Medical Center

PREREQUISITES: Third-year clerkship in Internal Medicine

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1
DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: The goal of the Infectious Disease faculty is to provide the student with the opportunity to be the primary evaluator of patients with a broad spectrum of common infections and to formulate a diagnostic and therapeutic plan; these are then discussed and a rational approach to the patient's illness is formulated. There is also emphasis on appropriate use of antibiotics.

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
9. HIV infection and its complications

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3 – 6
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 – 12:00 Work Rounds with Fellows and Residents: Evaluate New Consults</td>
<td>8:30 – 10:00 Combined I.D. Conference (WVA, OVMC/SVA &amp; CS)</td>
<td>9:00 – 12:00 Work Rounds &amp; New Consults</td>
<td>9:00 – 11:00 Work Rounds</td>
<td>8:00 – 8:30 ID Topic Talk</td>
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<td>12:00 – 1:00 ID/Pulmonary Medicine Combined Conference (Monthly)</td>
<td>1:00 – 4:30 Immunodeficiency Clinic</td>
<td>12:00 – 1:00 Medical Grand Rounds</td>
<td>12:00 – 1:00 Noon Conference</td>
<td>8:30 – 11:30 ID Clinic</td>
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<td>1:30 – 3:30 Attending Rounds with Full-Time Faculty</td>
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<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: None

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. ID Journal Club meets twice a month. ID Research Conference meets once a month.
ME245.07  INFECTION DISEASES

Advanced Clinical Clerkship  Location:  CS

COURSE CHAIR:
David Hardy, M.D.
(310) 423-3896

SUPPORTING FACULTY:
Dr. P.L. Gaut

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

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

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007  ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

COURSE 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 appropriate antimicrobial agents, including appropriate use of serum level determinations.
6. Increased proficiency in collection, analysis, and presentation of data, especially in consultative format.
7. Working knowledge of how to best interface with the clinical microbiology laboratory.

DESCRIPTION:  This elective will expose students to a wide variety of inpatient infectious disease patient cases as well as some outpatient HIV patients.  Students will actively participate in all aspects of ID consult service.

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
8. Hospital acquired infection

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 WEEK BY STUDENT:  2 – 3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  10

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 Work Rounds with Fellows &amp; Evaluation of New Consults</td>
<td>8:30 UCLA Combined Clin. Conf. Wadsworth, Sepulveda or CSMC</td>
<td>8:00 Cour Lecture 9:00 – 12:00 I.D. Clinic</td>
<td>8:30 Work Rounds with Fellows &amp; Evaluations of New Consults 11:00 Microbiology Lab. Rounds 9:00 – 11:00 Core Lectures</td>
<td>8:30 Med. Grand Rounds 11:00 Microbiology Lab Rounds</td>
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<td></td>
<td>9:00 Core Lectures</td>
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<td>12:00 Med. I.D. Grand Rounds (monthly) 2:15 Work Rounds 4:00 ID Consult Rounds</td>
<td>4:00 – 6:00 Attending I.D. Rounds 1:00 Med./Peds. I.D. Conference ID Rounds</td>
<td>1:00 – 5:00 Attending I.D. Rounds</td>
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<td>PM</td>
<td>4:00 – 6:00 Attending I.D. Rounds</td>
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<td>4:00 – 6:00 Attending I.D. Rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

ME245.08  INTERNAL MEDICINE—INFECTIOUS DISEASE

Advanced Clinical Clerkship  Location: KAISER.SUN
2006–2007  Revised: 11/28/05

COURSE CHAIR:  PHONE #:  EMAIL:
Jim Nomura, M.D.  (323) 783-5867  jim.h.nomura@kp.org

SUPPORTING FACULTY:
Marc La Riviere, M.D., Townson Tsai, M.D.,

STUDENT COORDINATOR:  PHONE #:  EMAIL:
Steve Valencia  (323) 783-4516  jim.h.nomura@kp.org

REPORT TO:  Clerkship Coordinator, Center For Medical Education, 4733 Sunset Blvd., Bldg. B, West Mezzanine, 3rd Floor at 8:30 a.m.  Then report to 1505 Edgemont, 2nd Floor.

PREREQUISITES:
Medicine and Surgery

STUDENTS / PERIOD:  max 1 min 1

DURATION:  3 weeks  (6 weeks by arrangement)

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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

DESCRIPTION:  The student, under the tutelage of a faculty member, will be seeing infectious disease consultations from all medical and surgical services in a hospital setting that is unique.  It is both a primary care community institution as well as a state of the art tertiary care center.

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

INPATIENT:  98%  OUTPATIENT:  2%
CONSULTATION:  100%  PRIMARY CARE:  0%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:
3 – 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:
15 – 20

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 9:00 Morning Report</td>
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<td></td>
<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 Rounds with ID Attending</td>
<td>Rounds with ID Attending</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  Weekends off.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  The work-up of an infectious disease problem sharpens clinical skills in that it involves rigorous examination of the patient's 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?"
# ME250.01 General Internal Medicine

**Advanced Clinical Clerkship**

**Location:** HARBOR

**Revised:** 11/28/05

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**COURSE CHAIR:** Darrell Harrington, M.D.  
**PHONE #:** (310) 222-2903

**SUPPORTING FACULTY:** Drs. Ayad Jindeel, Kathy Mostafaie, Janine Vintch, John Ford, Mark Munekata, Michelle Geller, and Kennamer Fellow

**STUDENT COORDINATOR:** Virginia Ramirez  
**PHONE #:** (310) 222-2465  
**E-MAIL:** vramirez@ladhs.org

**REPORT TO:** Harbor-UCLA Medical Center, B-212 at 9:00 am, (310) 222-2465 or 222-2466

**PREREQUISITES:** Medicine and Surgery

**AVAILABLE TO EXTERNALS:** Yes

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

**DURATION:** 3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:** 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

**DESCRIPTION:** This course emphasizes the management of the complex medical problems of all hospital inpatients who are not on inpatient medical services. 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

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<tr>
<th>INPATIENT</th>
<th>OUTPATIENT</th>
<th>CLOSE CONTACT WITH</th>
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<tr>
<td>70%</td>
<td>30%</td>
<td>X FULL TIME FACULTY</td>
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<td>80%</td>
<td>20%</td>
<td>X CLINICAL FACULTY</td>
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<td>X RESIDENTS</td>
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**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:** 3 – 15

**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:** 12 – 20

**TYPICAL WEEKLY SCHEDULE**

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<tr>
<td>AM</td>
<td>7:30 Clinical Conf. PCDC</td>
<td>8:30 Grand Rounds 10:00</td>
<td>7:30 Clinical Conf. PCDC</td>
<td>7:30 Clinical Conf. PCDC</td>
<td>7:30 Clinical Conf. PCDC</td>
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<td>8:30 Patient Care/ Consults</td>
<td>10:00 X-Ray Rounds 10:30</td>
<td>8:30 Patient Care/ Consults</td>
<td>8:30 Patient Care/ Consults</td>
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<td>9:30 Consult Core Curric. 10:00</td>
<td>Perioperative Rounds</td>
<td>9:30 Consult Core Curric. 10:00</td>
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<td>PM</td>
<td>12:00 Internal Medicine Lecture</td>
<td>12:00 EKG/CXR Conference 1:30</td>
<td>12:00 Primary Care Grand Rounds</td>
<td>12:00 Medical M &amp; M 1:30</td>
<td>12:00 Infectious Disease Conference</td>
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<td>1:00 Preoperative Clinic PCDC</td>
<td>3:30 Attending Rounds</td>
<td>3:30 High Risk OB Clinic 3:30</td>
<td>3:30 Perioperative Sign-Out Rounds</td>
<td>3:30 Perioperative Sign-Out Rounds</td>
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<td>3:30 Perioperative Sign-Out</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** None

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:**

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**COURSE 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 and complications of general and spinal anesthesia.
ME250.02 GENERAL MEDICINE

Subinternship Location: KERN  
2006–2007 Revised: 9/20/05

COURSE CHAIR:  
Royce H. Johnson, M.D., F.A.C.P.  (661) 326-2224  
Director of Medical Students—Alan S. Ragland, D.O.

SUPPORTING FACULTY:  
Drs. J. Abraham, S. Baqi, J. Caldwell, R. Johnson, A. Karunakar,  
A. Munoz, J. Perez, S. Ratnayake and S. Ragland

STUDENT COORDINATOR:  
Tracy Fuentez  (661) 326-2168  
E-MAIL: fuentzt@fkernmedctr.com

REPORT TO: Kern Med Ctr, Dept. of Med., 1830 Flower St.,  
Bakersfield, CA 93305, 8:00 am 1st day.

PREREQUISITES: Internal Medicine

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 3 min 1

DURATION: 4 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
By Arrangement

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

COURSE 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 and understanding problem oriented progress notes.
3. Establish priorities in diagnostic tests; interpretation of lab data; cost-effective patient evaluation.
4. Develop clinical judgment and decision-making skills.
5. Ascertain patient’s goals understanding and adherence with meds and/or lifestyle changes.
6. Understand the basic concept and dilemmas in medical ethics.
7. Role of computers in medicine and their use in education, practice management, QA.

STUDENT EXPERIENCES

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  
9. Coccidiomycosis

INPATIENT: 70%  
OUTPATIENT: 30%  
CONSULTATION: 10%  
PRIMARY CARE: 90%

CLOSE CONTACT WITH:  
X FULL TIME FACULTY  
X CLINICAL FACULTY  
FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER Pharmacists, Nurses, Respiratory Therapists, and Dieticians

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 9 – 10

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

TYPICAL WEEKLY SCHEDULE

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<td>Student Lecture</td>
<td>Ambulatory Care Center</td>
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<td>Ambulatory Care Center</td>
<td>Preceptor Rounds (for students only)</td>
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<td>Student Lecture</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every 8th night: Saturday a.m. 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 OBJECTIVES (in order of importance)

1. Appreciate the important roles of careful history taking and a refined physical examination in developing a focussed differential diagnosis.

2. Appreciate the impact of a succinct and accurate differential diagnosis on the complexity, efficacy, complications and costs of patient management.

3. Review, in depth, the approach to physical examination of each of four organ systems (respiratory, cardiovascular, gastrointestinal and neurological).

4. Refine these examination skills in selected patients.

5. Review and recognize about 160 color slides of clinical cases showing important diagnostic features.

6. Identify abnormal physical findings in patients who are admitted at the time of the course.

7. Review and recognize important diagnostic skills in radiology.

8. Self-assessment of diagnostic skills through clinical slide quiz.

DESCRIPTION: The combined objectives of this course aim to refine diagnostic skills so that the student can develop a focused differential diagnosis based on recognition of physical findings, laboratory or radiographic features. Each morning will commence with a review of 20 clinical slides showing characteristic physical findings. Differential diagnosis will be discussed. Examination of the four major organ systems will be demonstrated by one of the faculty with emphasis on refinement of examination technique to increase its value. Then students will encounter patients with abnormal physical findings and have the opportunity to refine and demonstrate their examination techniques.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. Cardiovascular
2. Respiratory
3. Abdominal
4. Neurologic
5. Musculo-skeletal
6. Ophthalmologic

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 13
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: N/A

TYPICAL WEEKLY SCHEDULE

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<td>Clinical Slides</td>
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<td>Clinical Slide Quiz</td>
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<td>Demonstration of organ system examination</td>
<td>Demonstration of diagnostic skills in radiology</td>
<td>Demonstration of organ system examination</td>
<td>Demonstration of diagnostic skills in radiology</td>
<td>Clinical Cases-Differential Diagnosis</td>
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<tr>
<td>PM</td>
<td>1:00 – 5:00</td>
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<td>Small Groups: Identification of abnormal physical findings in patients</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Students will need white coats for encounters with patients. Bring a stethoscope to sessions. Bring a tendon hammer and ophthalmoscope only if you already have them.
Advanced Clinical Clerkship | LOCATION: WVA  
---|---

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

**SUPPORTING FACULTY:**  
Rehabilitation Medicine Service Staff

**STUDENT COORDINATOR:**  
Beatrice C. Blake  
PHONE #:  
(310) 478-3711 ext. 48315 or (310) 268-3342  
E-MAIL: beatrice.blake@med.va.gov

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

**AVAILABLE TO EXTERNS:**  
Yes

**PREREQUISITES:**  
MS IV only

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

**DURATION:**  
3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:**  
By Arrangement

**DESCRIPTION:**  
This clerkship provides an introduction to PM&R through supervised clinical experience. Patients will be examined and treatment programs carried out under supervision of the Rehabilitation Medicine Staff. An introduction to Electromyography, brace, prosthetic and wheelchair prescriptions, and cardiac rehabilitation are all included.

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**

<table>
<thead>
<tr>
<th>Position</th>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Stroke</td>
<td>30%</td>
<td>70%</td>
<td>30%</td>
<td>70%</td>
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<tr>
<td>2. Amputation</td>
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<tr>
<td>3. Back strain</td>
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<tr>
<td>4. Disc syndrome</td>
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<tr>
<td>5. Other musculoskeletal pain</td>
<td></td>
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<tr>
<td>6. Spinal cord lesion</td>
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<tr>
<td>7. Arthritis</td>
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<tr>
<td>8. Head injury</td>
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</tbody>
</table>

**CLOSE CONTACT WITH:**

- FULL TIME FACULTY
- CLINICAL FACULTY
- FELLOWS
- RESIDENTS
- INTERNS
- OTHER Physical & Occupational Therapists

**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:**  
5+

**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:**  
150

**TYPICAL WEEKLY SCHEDULE**

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<tbody>
<tr>
<td>AM</td>
<td>X-Ray Conference</td>
<td>Neurology Case Presentation and Discussion or Research Presentation</td>
<td>Patient/Rounds</td>
<td>Radiology Case Presentations</td>
<td>Journal Club</td>
</tr>
<tr>
<td></td>
<td>Patient Evaluation*</td>
<td>Patient Evaluation*</td>
<td>RMS Bed Service</td>
<td>Amputee Clinic</td>
<td>Cardiac Rehab</td>
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<tr>
<td></td>
<td>Electromyography</td>
<td>OP Clinic</td>
<td>Electromyography</td>
<td>Electromyography</td>
<td>Patient Evaluation*</td>
</tr>
<tr>
<td>PM</td>
<td>Patient Evaluation*</td>
<td>Prosthetics or Musculoskeletal Lecture Series</td>
<td>Patient Evaluation*</td>
<td>Chronic Pain Clinic</td>
<td>Patient Evaluation*</td>
</tr>
<tr>
<td></td>
<td>OP Clinic</td>
<td>Core Lecture Annual Lecture Series</td>
<td>OP Clinic</td>
<td>Neurolysis (Nerve and Muscle Block)</td>
<td>OP Clinic</td>
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<tr>
<td></td>
<td>Brace Clinic</td>
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<td>OP Clinic</td>
<td></td>
<td>OP Clinic</td>
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<td></td>
<td></td>
<td>Wheelchair Clinic</td>
<td></td>
<td>Wellness Clinic or Gait Lab</td>
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<td></td>
<td>Falls Clinic</td>
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<td>Chronic Pain Clinic</td>
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</table>

**ADDITIONAL COMMENTS & OTHER SPECIAL REQUIREMENTS:**  
A student in this clinical clerkship will spend 1 week on the Rehabilitation Medicine Inpatient Bed (student will be Primary Care Physician for selected rehabilitation inpatients) and 2 weeks in the Rehabilitation Medicine 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.
COURSE OBJECTIVES (in order of importance)

1. Clinical skills in history taking and physical exam of patients with musculoskeletal disorders.
2. Knowledge of disease process in musculoskeletal pain, physical disabilities, amputation, neurological disabling diseases, and stroke.
3. Medical judgment in management of the patients with pain, disabilities, and amputation.
4. Introduction to Manual Medicine principles
5. Interpretation of tests: electromyography, bone and joint x-rays, MRI.
6. Utilization of and interaction with the health care interdisciplinary team.
7. Basic science principles of physiology and anatomy of the musculoskeletal system correlated to clinical problems.
8. Interested students will optimize their rotation by familiarizing themselves with Hoppenfeld’s book Physical Examination of the Spine and Extremities prior to the rotation.

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 and neck pain
4. Peripheral neuropathy
5. Stroke
6. Amputation
7. Sports medicine
8. Trauma

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

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

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 70 – 75

TYPICAL WEEKLY SCHEDULE

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<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>Outpatient EMG</td>
<td>Rheumatology</td>
<td>Physical Medicine</td>
<td>Medicine Grand Rounds</td>
<td>Physical Medicine</td>
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<td></td>
<td></td>
<td>Outpatient Clinic</td>
<td>New Outpatient Clinic</td>
<td>Urgent Rehab Clinic at WVA</td>
<td>New Outpatient Clinic</td>
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<tr>
<td></td>
<td></td>
<td>Rheumatology Conference</td>
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<tr>
<td>PM</td>
<td>Outpatient EMG</td>
<td>1:00 – 4:30 Lecture at WVA</td>
<td>Tele Physician Medicine &amp; Wellness Clinic 1st &amp; 3rd Amputee/Brace Clinic 4th Physical Medicine New Outpatient Clinic 2nd</td>
<td>Physical Medicine Follow-up Outpatient Clinic</td>
<td>Pain Management Clinic at WVA</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Interested students would do well to have read Stanley Hoppenfeld’s Physical Examination of the Spine and Extremities.
**ME254.03 PHYSICAL MEDICINE AND REHABILITATION INTRODUCTION**

**Advanced Clinical Clerkship**

**Location:** CS

**Revised:** 4/13/06

**COURSE CHAIR:**
Richard Riggs, M.D.  
PHONE #: (310) 423-3148

**SUPPORTING FACULTY:**
Jerry Judd Pryde, M.D.

**STUDENT COORDINATOR:**
Michelle Demond  
PHONE #: (310) 423-3148

**REPORT TO:**
Michelle Demond MOB RM 915E

**PREREQUISITES:**
Medicine

**AVAILABLE TO EXTERNALS:**
No

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

**DURATION:**
3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:**
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

**COURSE 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 work-ups associated with rehabilitation problems.
7. To understand methods of approaching difficult patient behaviors.
8. To understand research frontiers in the field, current cost issues and 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:**
X FULL TIME FACULTY  
X CLINICAL FACULTY  
X FELLOWS  
X RESIDENTS  
X INTERNS  
X OTHER All therapists, MSWs, psychologists

**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/ BY TUDENT:**
OPD =3, INPT=5

**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:**
OPD=25, INPT=50

**TYPICAL WEEKLY SCHEDULE**

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</table>
| **AM** | 8:00 – 10:00 Rounds on Rehabilitation  
10:00 – 12:00 Consults Therapy Observation | 8:00 – 9:00 Rounds on Rehab Unit  
9:00 – 10:00 Team Meeting  
10:00 – 12:00 Consults Therapy Observation | 8:00 – 9:00 Rounds on Rehab Unit  
9:00 – 12:00 Consults Therapy Observation | 8:00 – 9:00 Rounds on Rehab Unit  
9:00 – 11:00 Consults Therapy Observation  
11:00 – 12:00 Conference | 8:00 – 9:00 Rounds on Rehab Unit  
9:00 – 11:30 Consults Therapy Observation  
11:30 – 1:00 Didactic PM&R Lectures at Cedars |
| **PM** | 12:00 – 1:00 Noon Conference (Optional)  
1:00 – 5:00 Consults, Rounds | 12:00 – 1:00 Noon Conference (Optional)  
1:00 – 3:00 Didactic PM&R Lectures at+ Wadsworth VA | 1:00 – 5:00 Outpatient Clinic | 12:00 – 1:00 Noon Conference  
1:00 – 3:00 Outpatient Clinic  
3:30 – 5:00 Conference | 11:30 – 1:00 Didactic PM&R Lectures at Cedars  
1:00 – 5:00 Consults, Rounds |

**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:**
Possible phone call weeknights 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.
ME257.01 WOMEN’S HEALTH

2006–2007
Revised: 11/9/04

COURSE CHAIR: PHONE #: COURSE OBJECTIVES (in order of importance)
Jodi Friedman, M.D. (310) 794-7235

1. Increase knowledge of gender-specific issues and disease processes. Particular emphasis will be placed on health maintenance and, family planning, common gynecological disorders, STD’s, breast disorders, pelvic pain, IBS and mental health.

SUPPORTING FACULTY:
Dr. Sue Baillie Dr. Robert Bennion Dr. Angela Chen
Dr. Ardis Moe Dr. Jeanine Rahimian Dr. Andrea Rapkin
Dr. Kirsten Tillisch Dr. Katie Ward Dr. Deborah Yaeger

STUDENT COORDINATOR: PHONE #: E-MAIL: FAX:
Jason Bergschneider (310) 267-0442 jbergschneider@mednet.ucla.edu (310) 267-0445

REPORT TO:
Dr. Jodi Friedman, 13-060 CHS, 8:00 AM

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Health maintenance issues: Screening, prevention
2. Family planning
3. Menopause
4. Mental health issues
5. Cardiovascular disease
6. Uterine bleeding
7. Irritable Bowel Syndrome
8. Breast disorders/work-up of breast mass
9. Work-up of abnormal Pap smears

STUDENT EXPERIENCES

STUDENT EXPERIENCES

INPATIENT: 0%

CLOSE CONTACT WITH:
X FULL TIME FACULTY

OUTPATIENT: 100%

CLINICAL FACULTY
X FELLOWS

CONSULTATION: 10%

RESIDENTS
X INTERNS

PRIMARY CARE: 90%

OTHER (Nurse Practitioner)

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:
variable

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

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: There is a Pelvic Pain Clinic at the West Medical Building every second and fourth Friday of the month. Each student taking this elective should go at least once to this clinic. Students are also required to keep a PDA log.
COURSE 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.

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 patient. 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 patient material.

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 9:00</td>
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<td>8:30 – 12:00</td>
<td>7:00 – 8:00</td>
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<td>11:00 – 12:00</td>
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<td>9:30 – 11:00</td>
<td>10:00 – 11:00</td>
<td>9:30 – 10:30</td>
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<td></td>
<td>Chief's Rounds, 6SW Conf. Rm.</td>
<td>Transplant Clinic (T. fellow)</td>
<td>CAPD Clinic - Dr. Rodriguez (T. fellow)</td>
<td>Attending Rds</td>
<td>Hypertens Rds, Dr. S. Franklin</td>
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<td>10:00 – 12:00</td>
<td>10:00 – 12:00</td>
<td>11:00 – 12:00</td>
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<td></td>
<td>Attending Rds</td>
<td>Attending Rds</td>
<td>Attending Rds 6SW Conf. Rm, Fellows,. Studts.</td>
<td>Fluid &amp; Electrolyte Conf. 6SW Conf Room</td>
<td>Attd. Rds 6SW Conf Rm.</td>
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</tbody>
</table>

| PM   | 1:00 – 1:45 | 1:30 – 2:30 | 1:00 – 1:45 | 1:00 – 1:45 | 1:30 – 2:30 |
|      | Renal Pathology Conf.Rm. 6610 Fellows, residents, students. Dr. A. Cohen | Transplant Rounds (T. fellow) 6SW Conf. Rm. | Renal Path Conf.Alt. with Radiology (1st wk US +CT Rad. 8th Ultrasd) (3rd wk.) 2:00 – 3:00 | Renal Path Conf.Alt. with Radiology (1st wk US +CT Rad. 8th Ultrasd Dr. Van Allen) (3rd wk.) 2:00 – 3:00 | Transplant Rds. |
|      | 4:00 – 6:00 | 4:00 – 6:00 | Nuc. Med. | 1:30 – 3:30 | 3:30 – 5:00 |
|      | Transplant Rds (T. fellow) | 4:00 – 6:00 | Transplant Rds. | 3:30 – 5:00 | Transplant Rds. (T. fellow) |
|      | 4:00 – 5:00 | 4:00 – 5:00 | 4:00 – 5:00 | 4:00 – 5:00 | 4:00 – 5:00 |

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None
ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: None
ME260.03 NEPHROLOGY

Advanced Clinical Clerkship Location: OVH 2006–2007 Revised: 12/01/05

COURSE CHAIR: Dalila B. Corry, M.D., Chief (818) 364-3205

PHONE #: SUPPORTING FACULTY: Dr. James Wilson and Dr. Chi Pham

STUDENT COORDINATOR: Mark DeVany (818) 364-3205 E-MAIL: mdevany@ladhs.org

PHONE #: REPORT TO: Olive View Medical Center, Dept. of Medicine Office, Room 2B-182 at 8:00 a.m.

STUDENT COORDINATOR: PHONE #: Dalila B. Corry, M.D., Chief (818) 364-3205

E-MAIL: mdevany@ladhs.org

REPORT TO: Olive View Medical Center, Dept. of Medicine Office, Room 2B-182 at 8:00 a.m.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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 glomular 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.

DESCRIPTION: Teaching will occur at Olive View-UCLA Medical Center. Students will be directed to the best teaching cases in outpatient and inpatient settings. They will have the opportunity to observe procedures such as biopsies of native as well as transplanted kidneys.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

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

INPATIENT: 66%
OUTPATIENT: 34%
CONSULTATION: 66%
RENAI CLINICS: 34%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 8:30 Chief’s Seminar 8:30 – 12:00 Renal Clinic at OVH</td>
<td>8:30 – 12:00 Renal Clinic at OVH</td>
<td>7:00 – 8:00 Renal Grand Rounds 8:30 – 9:30 Medical Grand Rounds</td>
<td>7:15 – 8:15 Renal Pathophysiology 8:15 – 9:15 Research Seminar 10:00 – 12:00 Nephrology Core Curr.</td>
<td>Noon Conference 12:00 – 1:00 Journal Club or Renal Imaging</td>
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<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
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<tr>
<td>PM</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
<td>Noon Conference 2:00 – 4:00 Consult Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME260.04  NEPHROLOGY AND HYPERTENSION

Advanced Clinical Clerkship  Location: HARBOR  2006–2007  Revised: 12/5/05

COURSE CHAIR:  PHONE #:  
Joel D. Kopple, M.D.  (310) 222-3891

SUPPORTING FACULTY:  
Drs. S.A. Adler, L. Barba, R. Hirschberg, R. Mehrotra, K. Kalantar

STUDENT COORDINATOR:  PHONE #:  
Kathy Rowley  (310) 222-3891
E-MAIL:  krowley@labiomed.org

REPORT TO:  
Harbor-UCLA Medical Center, Division of Nephrology and Hypertension, C1 Annex.

PREREQUISITES:  
Medicine

AVAILABLE TO EXTERNALS:  
Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

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 and busy 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.

COURSE 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Fluid and electrolyte problems
2. Acid-base disorders
3. Hypertension
4. Acute glomerulonephritis
5. Chronic Renal Disclosure
6. Nephrotic syndrome
7. Chronic renal failure
8. Acute renal failure
9. Chronic renal disease

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>8:00 – 12:00 Nephrology Clinic</td>
<td>8:30 – 12:00 Nephrology Clinic</td>
<td>7:15 – 8:15 Basic Science Seminar*</td>
<td>10:00 – 12:00 Consult Rounds</td>
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<td>9:30 – 11:00 Core Curriculum Lecture</td>
<td>12:00 – 1:00 Medicine Lecture Series</td>
<td>12:00 – 1:00 Consult ROUNDS</td>
<td>1:00 – 4:00 Hypertension Clinic</td>
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<tr>
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<td>1:00 – 2:30 Neph Grand Rds</td>
<td>2:00 – 5:00 Consult ROUNDS</td>
<td>4:30 – 6:00 Journal Club, Renal Pathology Research Conference</td>
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<td>3:00 – 5:00 Neph Rounds</td>
<td>5:00 – 6:00 Transplant ROUNDS (optional)</td>
<td>3:00 – 5:00 Consult ROUNDS</td>
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<td>5:00 – 6:00 Transplant Rds (opt.)</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.
SUPPORTING FACULTY:

STUDENT COORDINATOR:
Helen Coleman
PHONE #: (310) 268-3835
E-MAIL: helen.coleman@mednet.va.gov

REPORT TO: Nephrology Section W111L, VA Med Ctr West L.A., Bldg. 500, Rm. 6023; 9:00 a.m.

PREREQUISITES: Medicine

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: Students are on the renal consultation service with responsibilities similar to the interns. They will do renal and hypertension clinics at the VAWMC. The renal consult and clinic experience involves patients with acute and chronic renal failure of diverse etiologies, problems in diagnosis and management of fluid and electrolyte and acid-base disturbances. Students participate in daily ward rounds, presenting new and follow-up patients to the attending physician. Once a week students attend the Renal and Hypertension out-patient clinics and are assigned one to two patients. Weekly conference consists of Renal Grand Rounds held jointly with UCLA-CHS Nephrology, pathophysiology seminar on Nephrology, a research oriented journal club, and Chief’s Rounds.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 4

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 6

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>Inpatient 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)</td>
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<tr>
<td></td>
<td>9:00 – 12:00 Inpatient Workups/ Didactic Sessions</td>
<td></td>
<td>9:00 – 12:00 Hypertension Clinic</td>
<td>9:00 – 12:00 Medical Grand Rounds</td>
<td>8:15 – 9:15 Research in Progress (UCLA-CHS Participation) Inpatient Workups Didactic</td>
</tr>
<tr>
<td>PM</td>
<td>1:30 – 3:30 Attending Rounds</td>
<td>1:30 – 3:30 Attending Rounds</td>
<td>12:00 – 1:00 Medical Grand Rounds Attending Rounds</td>
<td>1:30 – 3:30 Attending Rounds</td>
<td>1:30 – 3:30 Attending Rounds</td>
</tr>
<tr>
<td></td>
<td>Inpatient Workups</td>
<td></td>
<td>Inpatient Workups</td>
<td></td>
<td>Inpatients Workups</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: It is expected students will learn the approach to the oliguric patient, the work-up 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 hemo dialysis, as well as Continuous Ambulatory Peritoneal Dialysis (CAPD). The outpatient experience is designed to familiarize the student with the longitudinal course of renal disease and offer a more practical approach to diagnosis and management of problems in Nephrology.

194
ME260.06 Nephrology

Advanced Clinical Clerkship       Location: ST. MARY       2006–2007
Revised: 12/19/05

COURSE CHAIR: Dr. C. Choi
PHONE #: (562) 491-9350

SUPPORTING FACULTY: Nephrology Attending Staff

STUDENT COORDINATOR: Sylvia Perez
PHONE #: (562) 491-9350

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

PREREQUISITES: Medicine

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

COURSE 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.

DESCRIPTION: This course involves the student in a variety of inpatient and outpatient activities related to this consultation service. The student would learn under the guidance and teaching of attending nephrologists and internal medicine residents. Among the typical learning opportunities are evaluation of acute renal failure, management of chronic renal failure and hemodialysis, evaluation and management of hypertension, and assessment and treatment of fluid and electrolyte disorders.

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
INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 9

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00 Morning Report</td>
<td>9:00 Morning Rounds</td>
<td>8:00 Morning Rounds</td>
<td>9:30 Consult Rounds</td>
<td>8:00 Morning Report</td>
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<td></td>
<td>9:30 Work Rounds</td>
<td>10:00 Work rounds</td>
<td>9:30 Work Rounds</td>
<td>11:00 Renal Lecture/Core Curriculum</td>
<td>9:30 Morning Report</td>
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<td></td>
<td>11:00 Consult Rounds</td>
<td>Self Study</td>
<td>11:00 Nephrology Clinic or Renal Transplant Clinic</td>
<td>11:00 Pharmacy or Nutrition Svc Nephrology Lecture</td>
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<tr>
<td>PM</td>
<td>12:30 Noon Conference</td>
<td>12:30 Noon Conference</td>
<td>1:30 Renal Clinic</td>
<td>12:30 Noon Conference</td>
<td>12:30 Noon Conference</td>
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<tr>
<td></td>
<td>2:00 General Medicine Clinic</td>
<td>2:00 Consult Rounds</td>
<td>1:30 Renal Clinic</td>
<td>2:00 Consult Rounds</td>
<td>2:00 Consult Rounds</td>
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<td>3:00 Hemodialysis</td>
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<td></td>
<td></td>
<td>Teaching Conf.</td>
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</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

195
ME260.08  NEPHROLOGY

Advanced Clinical Clerkship  Location: KAiSER.SUN  2006–2007  Revised: 11/28/05

COURSE CHAIR:  PHONE #:
Dean Kujubu, M.D. (323) 783-4516

SUPPORTING FACULTY:
Drs. A. Abcar, E. Dudek, S. Rasgon, D. Kujab, V. Kumar,

STUDENT COORDINATOR:  PHONE #:
Steve Valencia (323) 783-1432

REPORT TO:  4733 Sunset Blvd., 3rd floor at 8:30 a.m. Then to Nephrology Dept. 4700 Sunset, 2nd Floor

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNs:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

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 outpatient 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 WEEK BY STUDENT:  3 – 12

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

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
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<tbody>
<tr>
<td>8:00 – 8:30</td>
<td>Morning Report</td>
<td>Morning Report</td>
<td>Morning Report</td>
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<tr>
<td>AM</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
<td>Attending Rounds</td>
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<tr>
<td>11:00 – 12:00</td>
<td>Renal Grand Rounds</td>
<td>Patient Care Conference</td>
<td>Renal Journal Club or Dialysis Conference</td>
<td>Consultation Rounds</td>
<td>Sign-Out Rounds</td>
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<tr>
<td>1:30 – 2:00</td>
<td>Consultation and Work Rounds</td>
<td>Consultation and Work Rounds</td>
<td>Consultation and Work Rounds</td>
<td>Renal OP Clinic</td>
<td>Consultation and Work Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>Renal Journal Club &amp; Patient Problem Conference</td>
<td>Medicine Grand Rounds</td>
<td>Urology Grand Rounds</td>
<td>Transplant Clinic (Optional)</td>
<td>Kidney Stone Clinic (optional)</td>
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<td>5:00</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  All students receive free parking while on rotation.
ME270.01 PULMONARY MEDICINE

Advanced Clinical Clerkship  Location: CS  2006–2007  Revised: 11/28/05

COURSE 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 inpatient problems.
7. Library research and interpretation of literature.
8. Oral presentations of clinical cases.

DESCRIPTION:
During this clerkship, students will be introduced to advanced pulmonary physiology. They will learn the basic management of pulmonary disorders as well as the pathophysiology of different disorders.

STUDENT EXPERIENCES

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT: 90%</th>
<th>CLOSE CONTACT WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Chronic bronchitis and/or emphysema</td>
<td></td>
<td>X FULL TIME FACULTY</td>
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<tr>
<td>2. Pneumonia</td>
<td></td>
<td>X CLINICAL FACULTY</td>
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<tr>
<td>3. Lung cancer</td>
<td></td>
<td>X FELLOWS</td>
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<tr>
<td>4. Asthma</td>
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<td>X RESIDENTS</td>
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<tr>
<td>5. Infection in the immunocomprised host</td>
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<td>X INTERNS</td>
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<tr>
<td>6. Unexplained dyspnea</td>
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<td>OTHER</td>
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<tr>
<td>7. Interstitial lung disease</td>
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<td>8. Respiratory insufficiency</td>
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<tr>
<td>9. Transplantation medicine</td>
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</tbody>
</table>

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 11

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 Physiology Conference</td>
<td>8:00 – 9:00 Clinical Case Presentation</td>
<td>8:00 – 9:00 Pulmonary Grand Rounds</td>
<td>8:00 – 9:00 Pulmonary Med/Surg Conference</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
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<td></td>
<td>10:00 – 12:00 Attending Rounds</td>
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<td>10:00 – 12:00 Attending Rounds</td>
<td>9:00 – 11:00 Pulmonary Clinic</td>
<td>10:00 – 12:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Journal Club</td>
<td>1:00 – 2:00 Radiology Conference</td>
<td>12:00 – 1:00 Pathology Conference</td>
<td></td>
<td>1:30 – 2:30 Pulmonary Function Tutorial</td>
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<td>1:00 – 2:00 Critical Care Series</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME270.04  PULMONARY AND CRITICAL CARE

Advanced Clinical Clerkship  Location: ASSOC.  2006–2007  Revised: 12/5/05

COURSE CHAIR:  PHONE #:
Robert S. Wright, M.D.  (805) 898-8840

SUPPORTING FACULTY:
Jeffrey Fried, M.D.

STUDENT COORDINATOR:  PHONE #:
Cynthia Stoddard  (805) 569-7315  E-MAIL: cstoddard@sbch.org

REPORT TO: Dr. Robert Wright, MICU, Santa Barbara Cottage Hospital, 8:00am on first day.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 2 weeks – 3 weeks (on request)

2006–2007 ROTATIONS BEGIN WEEKS:
2, 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 27, 29, 31, 33, 35, 37, 39, 41, 43, 45, 47, 49

COURSE 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.

DESCRIPTION: The student rounds and sees patients with the preceptor. Mornings are spent in a hospital setting with a 20-bed intensive care unit. The student will work-up patients and perform procedures depending on level of skill and at the discretion of the attending physician. Inpatients seen generally have respiratory failure, sepsis, and/or COPD. Afternoons are spent in an outpatient clinic setting.

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:  10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  50

TYPICAL WEEKLY SCHEDULE

<table>
<thead>
<tr>
<th>Hour</th>
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<tbody>
<tr>
<td></td>
<td>Bronchoscopy</td>
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<tr>
<td></td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
<td>Inpatient Rounds</td>
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<tr>
<td></td>
<td>Medical Lecture</td>
<td>Medical Lecture</td>
<td>Medical Lecture</td>
<td>Medical Lecture</td>
<td>Medical Lecture</td>
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<tr>
<td>PM</td>
<td>Outpatient Clinic</td>
<td>Outpatient Clinic</td>
<td>Outpatient Clinic</td>
<td>Outpatient Clinic</td>
<td>Independent Study</td>
</tr>
</tbody>
</table>

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.
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 a.m.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: This elective is structured around a busy consultation service, which is staffed by two pulmonary fellows, a medical resident, and an 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.

STUDENT EXPERIENCES

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 WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>12:15 – 1:00 Physiology Conference (PFT, etc.)</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>11:30 – 1:00 Medical Chest Conference</td>
<td>11:00 – 12:00 Consult Rounds</td>
<td>12:00 – 1:00 Medical Management Conference</td>
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<td></td>
<td>12:15 – 1:00 Chest X-Ray Conference (3rd Tues./Month)</td>
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<td>11:30 – 1:00 Chest/Infectious Disease Conference (1st Wed./Month)</td>
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<td>1:00 – 2:30 Consult Rounds</td>
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<tr>
<td>PM</td>
<td>1:00 – 3:00 Consult Rounds</td>
<td>1:00 – 2:00 TB Conference</td>
<td>1:00 – 2:00 Consult Rounds</td>
<td>12:00 – 1:00 Medical Management Conference</td>
<td>3:00 – 4:00 Respiratory Physiology Discussion</td>
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<td>4:00 – 5:00 Special Lecture Series</td>
<td>2:00 – 3:00 Consult Rounds</td>
<td>4:00 – 5:00 Interdisciplinary Chest Conference</td>
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<td>4:00 – 5:00 Consult Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

199
ME270.06  ADVANCED CLINICAL CLERKSHIP IN PULMONARY DISEASES

Advanced Clinical Clerkship  Location: CS  2006–2007  Revised: 11/28/05

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)

SUPPORTING FACULTY:
None

STUDENT COORDINATOR:  PHONE #:  2. Knowledge of critical care diseases including respiratory failure, sepsis, fluid and electrolyte abnormalities.
Robert N. Wolfe, M.D.  (310) 657-3792

REPORT TO:  Dr. Wolfe, 8635 W. 3rd Street, #475W, Los Angeles, at 7:00 a.m.

PREREQUISITES:  Medicine, Surgery, and Radiology

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 1  min 1

DURATION:  2 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  By Arrangement

DESCRIPTION:  The student will work one-on-one with a busy pulmonary-critical specialist whose practice is divided between a large teaching hospital (Cedars-Sinai) and a private office setting. The student will be exposed to the entire spectrum of pulmonary diseases and critical care problems. There will be emphasis on performing histories and physicals as well as developing differential diagnoses and appropriate diagnostic and therapeutic plans. The student can participate in invasive procedures such as fiberoptic bronchoscopy, endotracheal intubation and thorocentesis. The student will learn how to interact with patients and families frequently in serious, life-threatening situations. The student will be expected to do in-depth reading about the patients he/she sees and review various other topics such as pulmonary physiology.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES  INPATIENT:  50%  CLOSE CONTACT WITH:
1. Asthma  FULL TIME FACULTY
2. COPD  X  CLINICAL FACULTY
3. Interstitial lung disease  100%  FELLOWS
4. Evaluation of cough  PRIMARY CARE:  0%  INTERNS
5. Evaluation of dyspnea  OTHER
6. Eval. of solitary pulmonary nodules & infiltration
7. Pleural effusion
8. Respiratory failure

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:  25

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  38 – 50

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:00 – 11:00 Hospital Rounds &amp; Procedures (e.g., bronchoscopy, thorocentesis)</td>
<td>7:00 – 11:00 Hospital Rounds &amp; Procedures (e.g., bronchoscopy, thorocentesis)</td>
<td>7:00 – 11:00 Hospital Rounds &amp; Procedures (e.g., bronchoscopy, thorocentesis)</td>
<td>7:00 – 11:00 Hospital Rounds &amp; Procedures (e.g., bronchoscopy, thorocentesis)</td>
<td>7:00 – 11:00 Hospital Rounds &amp; Procedures (e.g., bronchoscopy, thorocentesis)</td>
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<td>11:00 – 5:00 Office</td>
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<td>5:00 – 8:00 Hospital Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME275.01  RHEUMATIC DISEASES

Advanced Clinical Clerkship  Location: CS  2006–2007
Revised: 1/4/06

COURSE CHAIR:  PHONE #:  
Michael H. Weisman, M.D., F.A.C.P.  (310) 423-2170

SUPPORTING FACULTY:  
Attending and Full-Time Staff - Division of Rheumatology

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

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

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 1 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

COURSE 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 techniques.
3. Medical decision making, analysis of medical data, and synthesis of information.
4. Diagnosis and management of complex inpatient 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, anti-TNF agents, mutrotrenate, anti-malarials, immunosuppressives (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 collagen vascular diseases
5. Osteoarthritis
6. Crystal-induced arthritis
7. Rheumatoid variants
8. Septic arthritis

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:  3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  23

TYPICAL WEEKLY SCHEDULE

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<td>Attending Rounds</td>
<td>UCLA-VA Clinic</td>
<td>Alt. X-Ray Conf. or Rheum. Conf.</td>
<td>Attending Rounds</td>
<td>Medical Grand Rounds</td>
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<td>Chief Rheum. Rounds—Dr. Weisman</td>
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<td>CSMC Clinic</td>
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<td>UCLA Clinic/ Conference</td>
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<td>PM</td>
<td>1:00</td>
<td>UCLA Harbor Clinic</td>
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<td>Inpatient Rounds</td>
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<td>UCLA Research Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR: Michael R. Liebling, M.D.  
PHONE #: (310) 222-3697

SUPPORTING FACULTY:  
George A. Karpouzas, M.D.  
(310) 222-3698

STUDENT COORDINATOR:  
Cecillia Maiava  
PHONE #: (310) 222-3697  
E-MAIL: cmaiava@labiomed.org

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: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION:  
Students evaluate and follow one to three inpatients for presentation to the attending staff during consultation rounds 5 days/week. During patient clinics, students evaluate the full spectrum of common and uncommon rheumatic diseases and present to the staff, 6 – 12 patients per week. Supervision and small-group teaching is provided by medical residents, subspecialty fellows, and the staff. Conferences and lectures in rheumatology, orthopaedics, allergy and radiology complete the program.

COMMON PROBLEMS/DISEASES  
1. Rheumatoid Arthritis  
2. Systemic Lupus Erythematosus  
3. Osteoarthritis  
4. Crystalline induced arthritis  
5. Spondyloarthropathy  
6. Infectious Arthritis  
7. Vasculitis  
8. Soft tissue pain  
9. Dermatomyositis  
10. Seleroderma

STUDENT EXPERIENCES

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<th>INPATIENT</th>
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<td>80%</td>
<td>X FULL TIME FACULTY</td>
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<td>CONSULTATION</td>
<td>25%</td>
<td>X CLINICAL FACULTY</td>
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<td>PRIMARY CARE</td>
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<td>X OTHER: Nurse Specialists</td>
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APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 88

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 12:00 Management Clinic</td>
<td>8:30 – 10:00 Medical Grand Rounds</td>
<td>11:00 – 12:00 Radiology Conference (Dr. D. Forrester)</td>
<td>8:00 – 12:00 Lupus/RA Clinic</td>
<td>9:00 – 11:00 Consults</td>
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<td>10:00 – 12:00 Rheumatology Attending Rounds</td>
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<td>PM</td>
<td>3:00 – 5:00 (TBA) Rheumatology Journal Club</td>
<td>1:00 – 6:00 General Arthritis Clinic</td>
<td>Consults Independent Study Rheumatology Journal Club at UCLA</td>
<td>Rheumatology Attending Rounds Independent Study</td>
<td>12:00 – 1:00 Rheumatology Grand Rounds at UCLA Consults Independent Study</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

INDEPENDENT STUDIES:  
Presentations at Journal Club, and Preparing Submissions for publication (Clinical).  
1. Defining project with Dr. Liebling/Karpouzas 3 weeks prior  
2. Writing case report/ chart reviews during elective  
3. Reviewing American College of Rheumatology Slide Collection

202
ME275.04 CLINICAL RHEUMATOLOGY

Advanced Clinical Clerkship Location: CHS

COURSE 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, cytotoxics, and new biologic agents.
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.

STUDENT 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, cytotoxics, and new biologic agents.
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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

1. RA
2. SLE/vasculitis
3. Osteoarthritis
4. Dermatomyositis/scleroderma
5. Gout
6. Reiter’s syndrome
7. Psoriatic arthritis
8. Osteoporosis

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 – 9:00 Basic Science Journal Club</td>
<td>Inpatient Evaluations or Rheumatology Clinic</td>
<td>Medical Grand Rounds</td>
<td>Inpatient Evaluations or Rheumatology Clinic</td>
<td>Rheumatology Inpatient Rounds</td>
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<td></td>
<td>Rheumatology Clinic 200 Medical Plaza</td>
<td>Attending Rounds</td>
<td>8:30 – 9:30 Rheumatology Clinic</td>
<td>or Rheumatology Clinic</td>
<td>11:00 – 12:00 Rheumatology Grand Rounds</td>
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<td>Immunology Forum Didactic Review Attending Rounds</td>
<td>Independent Study or Rheumatology Clinic</td>
<td>Attending Rounds</td>
<td>Didactic Review Attending Rounds</td>
<td>12:00 – 1:00 Health Services Research Conference</td>
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<td>4:00 – 5:00 Clinical Journal Club/Research Conference</td>
<td>Independent Study or Rheumatology Clinic</td>
<td>1:00 – 5:00 Rheumatology Clinic</td>
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<tr>
<td>PM</td>
<td>Immunology Forum Didactic Review Attending Rounds</td>
<td>Independent Study or Rheumatology Clinic</td>
<td>Attending Rounds</td>
<td>Didactic Review Attending Rounds</td>
<td>12:00 – 1:00 Health Services Research Conference</td>
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<td>4:00 – 5:00 Clinical Journal Club/Research Conference</td>
<td>Independent Study or Rheumatology Clinic</td>
<td>1:00 – 5:00 Rheumatology Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:

203
ME282.01 NUCLEAR MEDICINE

Advanced Clinical Clerkship

Location: WVA

2006–2007 Revised: 12/7/05

COURSE CHAIR:  PHONE #:
Marvin B. Cohen, M.D. (310) 268-3583

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

STUDENT COORDINATOR:  PHONE #:
Marvin B. Cohen, M.D. (310) 268-3583

REPORT TO:
West LA, Bldg. 500, Basement Room 0061

AVAILABLE TO EXTERNALS: Yes

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: 24%
OUTPATIENT: 76%
CONSULTATION: 100%
PRIMARY CARE: 0%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 45

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 110

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

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.

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 – 10:00 Rounds with Radiation Safety Officer 10:00 – 12:00 Nuclear Medical Clinic</td>
<td>8:30 – 10:00 Radiopharmacy 10:00 – 12:00 Nuclear Medicine Clinic</td>
<td>9:00 – 10:00 Nuclear Medicine Physics Lecture 10:00 – 12:00 Nuclear Medicine Clinic</td>
<td>8:30 – 12:00 Nuclear Cardiology Clinic</td>
<td>9:00 – 10:00 10:00 – 11:00 Radiopharmacy Lecture 11:00 – 12:00 Nuclear Med. Clinic</td>
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<tr>
<td>PM</td>
<td>1:00 – 2:00 Radiation Safety Lecture 2:00 – 4:00 Nuclear Med. Clinic 4:00 – 5:00 Imaging Interpretation and Dictation of Studies</td>
<td>1:00 – 2:00 Clinical Lecture 2:00 – 4:00 Nuclear Medicine Clinic 4:00 – 5:00 Imaging Interpretation and Dictation of Studies</td>
<td>Computer Application Lecture 2:00 – 4:00 Nuclear Medicine Clinic 4:00 – 5:00 Imaging Interpretation</td>
<td>1:00 – 2:00 Clinical Lecture 2:00 – 4:00 Nuclear Medicine Clinic 4:00 – 5:00 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 the student a comprehensive overview of Nuclear Medicine. The third week is spent in the PET facility.
COURSE OBJECTIVES (in order of importance)

1. The adoption of a management as opposed to curative approach to chronic pain patients.
2. Learn brief psychological assessment for patients with pain, including substance abuse potential and depression.
3. Learn appropriate pharmacotherapy for chronic and acute pain.
4. Gain an understanding of interventional approaches to pain.
5. Learn a musculoskeletal exam for chronic pain.

DESCRIPTION:
The comprehensive pain program consists of a Multidisciplinary Staff. Specialties involved include Anesthesia, Medicine, Physical Medicine & Rehab, Psychology, Psychiatry, Nursing, and Physical therapy. Students will have an opportunity to participate in evaluation of chronic, acute pain, and cancer patients under the supervision of a multidisciplinary team. This includes medication management, psychological testing (MMPI), biofeedback, injections and development of a comprehensive pain management plan. Students will also have an opportunity to observe or perform interventional pain procedures such as nerve blocks, joint, muscle, and tendon injections under direct supervision. Students will also attend scheduled lectures gear toward pain and musculoskeletal management. Optional experience with electromyogram (EMG) is also provided.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Spine pain
2. Neuropathic pain
3. Fibromyalgia/myofacial pain
4. Psychological issues related to pain
5. Headaches
6. Musculoskeletal pain
7. Post-surgical pain
8. Cancer pain

INPATIENT: 15%
OUTPATIENT: 85%
CONSULTATION: 15%
PRIMARY CARE: 100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:
8

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

TYPICAL WEEKLY SCHEDULE

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<td>7:30 – 8:00</td>
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<td>Blocks</td>
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<td>Chronic Pain Clinic</td>
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<td>9:00 – 12:00</td>
<td>Inpatient Consults</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE OBJECTIVES (in order of importance)
1. Students will be able to accurately interpret 90% of EKGs performed at a Community Hospital.
2. Students will be able to define the indications and procedure for Stress testing and interpret the results.
3. Students will be able to assess the role of Echocardiography in diagnosis and management of heart disease.
4. Students will observe a minimum of five Swan-Ganz catheter insertions, two pacemaker insertions, and one coronary arteriography. They will be able to identify indications for each of them.
5. Students will acquire a concept of basic hemodynamics.
6. Students will be able to manage and consult on patients with common cardiac disorders.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Coronary heart disease
2. Hypertension
3. Vascular heart disease
4. Pre-surgical evaluation for non-cardiac surgery in cardiac pts.
5. Cardiomyopathy

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 10
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 75

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
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<td>11:00 – 12:00 Stress Lab</td>
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<td>1:30 – 2:00 Card. Clinic</td>
<td>2:00 – 3:00 Card Clinic</td>
<td>3:00 – 4:00 Consult Rnd/ ECHO Reading</td>
<td>4:00 – 5:00 Core Lecture</td>
<td>1:30 – 2:00 EKG Reading</td>
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<td>2:00 – 3:00 Consult Rds</td>
<td>3:00 – 4:00 Consult Rds</td>
<td>4:00 – 5:00 Core Lecture</td>
<td>3:00 – 4:00 Consult Rds</td>
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<td>3:00 – 4:00 Card Clinic</td>
<td>4:00 – 5:00 Card Clinic</td>
<td>5:00 – 6:00 Core Lecture</td>
<td>3:00 – 4:00 Consult Rds</td>
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<td>4:00 – 5:00 Core Lecture</td>
<td>5:00 – 6:00 Core Lecture</td>
<td>6:00 – 7:00 Core Lecture</td>
<td>4:00 – 5:00 Core Lecture</td>
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<td>4:00 – 5:00 Core Lecture</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Saturday CCU/Consultation Round 9:00 – 11:00 a.m. On call with CCU Resident/Intern every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The emphasis of 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.
## Subinternship: ME325.01
**COMPREHENSIVE MANAGEMENT IN ENDOCRINOLOGY AND METABOLISM**

<table>
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<tr>
<th>Location: KDMC</th>
<th>2006–2007</th>
<th>Revised: 12/5/05</th>
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### COURSE CHAIR: (PHONE #):
Atam Singh, M.D., (323) 563-9353

### SUPPORTING FACULTY:
- Drs. M. Davidson, D. Echeverry, T. Friedman, S. Hsai, B. Salehian, A. Singh
  - Endocrinology/Medicine
- B. Suh

### COURSE CHAIR: PHONE #:
Atam Singh, M.D. (323) 563-9353

### STUDENT COORDINATOR:
Robert Gregory Miller (323) 563-9353
Email: rmiller@cdrewu.edu

### AVAILABLE TO EXterns:
No

### PREREQUISITES:
Inpatient and Ambulatory Medicine and Surgery

### STUDENTS / PERIOD:
max 3 min 1

### DURATION:
3 weeks

### 2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

### 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 five half-day clinics (Adult Endocrinology, Pediatric Endocrinology, Reproductive Endocrinology, Diabetes, Thyroid Biopsy and Gestational Diabetes) and 4-5 regularly scheduled weekly conferences. King/Drew Medical Center offers the student a unique opportunity to see and participate in the management of the most interesting and diverse cases of Endocrinology in Los Angeles. This is due to our county population and absence of private Attendings.

### COMMON PROBLEMS/DISEASES

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<td>1. Hyperthyroidism</td>
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<td>2. Hypothyroidism</td>
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<td>3. Hypercalcemia</td>
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<td>4. Diabetes</td>
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<td>5. Adrenal Insufficiency</td>
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<td>6. Cushing's Syndrome</td>
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<td>7. Pituitary Tumors</td>
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<td>8. Male and Female Reproductive Problems</td>
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### APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:
8

### TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:
38 – 50

### TYPICAL WEEKLY SCHEDULE

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<tr>
<td>8:30</td>
<td>Endocrine Research Conference</td>
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<td>Diabetes Clinic</td>
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<td>9:00 Reproductive Clinic attend 2nd and 4th Fridays</td>
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<td>9:30</td>
<td>High Risk OB Clinic</td>
<td>11:00</td>
<td>Medical Grand Rounds</td>
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<td>The first and 3rd Friday of the month is FNA Clinic</td>
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<td>10:00</td>
<td>Attending Rounds</td>
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<td>Consultations Evaluations</td>
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<td>12:30 Endocrine Journal Club</td>
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<tr>
<td>12:30</td>
<td>Consultations Evaluations</td>
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<td>Consultation Rds w/attending and fellow</td>
<td>1:00</td>
<td>4:30 Daily Reading</td>
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<td>3:30</td>
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### ON-CALL SCHEDULE & WEEKEND ACTIVITIES:
None

### ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
In one month, we see patients with DAX-1 deficiency, pseudo-hypoparathyroidism, Cushing's disease, and primary hyperaldosteronism. We have a strong faculty eager to teach students. King Drew Medical Center is perfectly safe, right off the 110 and 105 freeways and has free convenient parking. It will be a fantastic experience. For more information about the clerkship, visit our website at [http://www.cdrewu.edu/com2002/curriculum/clerkship4imSyllabus.asp#endocrinology](http://www.cdrewu.edu/com2002/curriculum/clerkship4imSyllabus.asp#endocrinology).
COURSE 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.


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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES

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APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT: 3 – 4

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10 – 13

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 – 12:00 Hepatology Clinic</td>
<td>10:30 Hepatopathology</td>
<td>9:00 – 12:00 Liver Transplant Clinic</td>
<td>10:00 – 1:00 Pre-Liver Transplant Clinic</td>
<td>8:30 Medicine Grand Rounds</td>
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<td>Hepatology Ethics Clinic</td>
<td>11:00 Hepatology Rounds</td>
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<td>11:00 Rounds with Liver Transplant Team</td>
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<td>PM</td>
<td>2:00 Rounds with Liver Transplant Team</td>
<td>1:00 – 5:00 Hepatology Clinic</td>
<td>12:00 – 1:00 Liver Seminar</td>
<td>12:00 – 1:00 Journal Club</td>
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<td>2:00 Rounds with Liver Transplant Team</td>
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<td>4:00 Patient Selection Committee</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Optional participation for weekend rounds, emergency admissions and Pathology Conference.

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 "p.m."
STUDENT COORDINATOR: PHONE #:
Gail Walton (323) 563-5924

SUPPORTING FACULTY:
A. Akhtar, M.D., Anil Dev, M.D., C. Anyadike, M.D.

PREREQUISITES: Inpatient and Ambulatory Medicine, Pediatrics and Surgery

REPORT TO: Augustus F. Hawkins, Mental Health Building, Room #2199, 8:30 a.m.

COLLEGES REQUIREMENT: Urban Underserved

AVAILABLE TO EXTERNs: No

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

COURSE 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.

DESCRIPTION: This is a consultation services clinical rotation for 3rd and 4th year medical students. The student will be exposed to a wide variety of G.I. disorders and will be expected to see up to five patients per week, to do the proper workup, and discuss each case with the related G.I. faculty.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. G.I. Bleeding & peptic ulcer disease
2. Acute abdominal pain & jaundice
3. Alcoholic liver disease/cirrhosis
4. Pancreatitis
5. Viral hepatitis
6. Diarrhea & AIDS
7. Inflammatory bowel disease
8. G.I. Malignancies

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

CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X RESIDENTS
X INTERNS
X OTHER G.I. Techs & G.I. Nurses

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 140 – 150

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<tbody>
<tr>
<td>PM</td>
<td><strong>Medical Lecture</strong>&lt;br&gt;***Journal Club&lt;br&gt;**Endoscopy Conference or Video Presentation&lt;br&gt;***G.I. Physiol.or Res.</td>
<td><strong>In-Service Flex. Sigmoidoscopy ERCP Training&lt;br&gt;Endoscopy Review</strong></td>
<td><strong>Medical Lecture</strong>&lt;br&gt;Fellow/Resident Topic Rev.&lt;br&gt;**G.I. Faculty Lecture&lt;br&gt;*<strong>G. I. Pathology Conf.</strong>&lt;br&gt;***Board Review&lt;br&gt;</td>
<td><strong>Tumor Board Gastroenterology Ambulatory Clinic</strong>&lt;br&gt;</td>
<td><strong>Medical Lecture Gastroenterology Ambulatory Clinic</strong></td>
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</tbody>
</table>

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.
COURSE CHAIR: Ram Chiller, M.D.  PHONE #: (310) 668-4581

SUPPORTING FACULTY: Ram Chiller, M.D., Ishrat Ali, M.D., Angel Ponce, M.D., Jaydutt Vadgama, PhD

STUDENT COORDINATOR (S): PHONE #: Mary Wade (323) 668-4581  E-MAIL: mwade@ladhs.org

REPORT TO: Yutaka Nihara, M.D., Dept. H. King Drew Medical Center, Hematology Oncology Clinic: 2A, 9:00 a.m.

AVAILABLE TO EXTERNS: No

PREREQUISITES: Internal Inpatient and Ambulatory Medicine

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

COURSE OBJECTIVES (in order of importance)
1. Increase knowledge of the pathogenesis, natural history, orderly investigation, differential diagnosis, and management of the commonly seen hematologic and oncologic disorders. These include anemia, thrombocytopenia and hemorrhagic disorders, breast, lung and colon cancer, 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 and oncologic disorders.
9. Library research and interpretation of hematologic and oncologic literature.

DESCRIPTION: The Hematology/Medical Oncology Service at King Drew Medical Center is a consultative service for the entire hospital, except Pediatrics. A large variety of hematologic and oncologic disorders are seen. Emphasis is placed on clinical evaluation of hematologic and oncologic disorders and various teaching aids such as slide sets and self-assessment examinations are available. While on the Hematology/Medical Oncology Service, students will be under the immediate supervision of the Clinical Hematology/Medical Oncology Resident. Students will present cases at Team Rounds and Hematology Grand Rounds, participate in the Hematology and the Medical Oncology Clinics, and weekly Hematology Seminars.

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 and lymphomas
7. Cancer of breast, lung, and colon
8. Elevated hematocrit

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

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 – 9:00 Morning Report</td>
<td>8-9 Mrrning Report 8:30 – 9:00 Heme-Onc Seminar 9:30 – 12:00 Heme-Onc Clinic</td>
<td>8:00 – 9:00 M and M 9:00- 9:30 Heme-Onc Seminar 9:30 – 12:00 Heme-Onc Clinic</td>
<td>9:00-9:30 Heme Slide Review 9:30-12:00 Breast Cancer Clinic</td>
<td>8:00 – 9:00 Board Review 9:00 – 9:30 Heme-Onc Seminar 9:30-12:00 Coumadin and General Heme-Onc Clinic</td>
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<td>9:00 – 9:30 Heme-Onc Review Q’s 9:00-11:00 Coumadin Clinic, Sickle Cell Anemia Clinic 11:00-12:00 Medical Grand Rounds 12:00 – 1:00 Heme-Onc Grand Rds</td>
<td>8:30 – 9:00 Heme-Onc Review Q’s 9:00-11:00 Coumadin Clinic, Sickle Cell Anemia Clinic 11:00-12:00 Medical Grand Rounds 12:00 – 1:00 Heme-Onc Grand Rds</td>
<td>8:00 – 9:00 M and M 9:00- 9:30 Heme-Onc Seminar 9:30 – 12:00 Heme-Onc Clinic</td>
<td>9:00-9:30 Heme Slide Review 9:30-12:00 Breast Cancer Clinic</td>
<td>8:00 – 9:00 Board Review 9:00 – 9:30 Heme-Onc Seminar 9:30-12:00 Coumadin and General Heme-Onc Clinic</td>
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<td>12:00 – 1:00 Medical Lecture Series 1:00 – 5:00 Heme-Onc Ward Consultation and Teaching Rounds</td>
<td>1:00 – 5:00 Heme-Onc Ward Consultation and Teaching Rounds</td>
<td>1:00 – 3:00 Heme-Onc Research Conference 3:00 – 5:00 Heme-Onc Consult Teaching Rounds 6:00-7:00 Cancer Support Grp (optional)</td>
<td>9:00-9:30 Heme Slide Review 9:30-12:00 Breast Cancer Clinic</td>
<td>8:00 – 9:00 Board Review 9:00 – 9:30 Heme-Onc Seminar 9:30-12:00 Coumadin and General Heme-Onc Clinic</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Medical Lecture Series 1:00 – 5:00 Heme-Onc Ward Consultation and Teaching Rounds</td>
<td>8:00 – 9:00 M and M 9:00- 9:30 Heme-Onc Seminar 9:30 – 12:00 Heme-Onc Clinic</td>
<td>12:00 – 1:00 Tumor Board 2:00 – 3:00 Med Onc Path Review 3:00 – 5:00 Inpatient Consults and Teaching Rounds</td>
<td>1:00 – 3:00 Heme-Onc Research Conference 3:00 – 5:00 Heme-Onc Consult Teaching Rounds 6:00-7:00 Cancer Support Grp (optional)</td>
<td>1:00 – 4:00 Hematology-Oncology Ward Consultation and Teaching Rounds</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 Morning Report, Medical Grand Rounds, the Internal Medicine Lecture Series, and Morbidity and Mortality Conference.
### ME345.05  ADULT INFECTIOUS DISEASES

**COURSE CHAIR:** Shobita Rajagopalan, M.D.  
**PHONE #:** (310) 668-4591

**SUPPORTING FACULTY:**  
Vinod Dhawan, M.D., Thomas Yoshikawa, M.D., PhD., Wilbur Jordan, M.D., Ronald Jefferson, M.D.

**STUDENT COORDINATOR:**  
Linda Thomas  
**PHONE #:** (310) 668-3042

**REPORT TO:** I.D. Fellow  
Room 4007A, 9:00 a.m., first Monday of elective. For required IM selective, meet in room 4009 @ 7:30 a.m.

**PREREQUISITES:**  
Inpatient Medicine and Surgery

**COLLEGES REQUIREMENT:** Urban Underserved

**AVAILABLE TO EXTERN:** Yes

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

**DURATION:** 3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:** 2,5,8,11,14,17,20,27,30,33,36,39,42,45

**DESCRIPTION:** The purpose of this sub-internship is to introduce the student to a comprehensive approach to adult infectious diseases encountered in an ethnically diverse population and to enable the recognition, evaluation, management and prevention of infectious diseases, both in concept and practice.

**STUDENT EXPERIENCES**

<table>
<thead>
<tr>
<th>COMMON PROBLEMS/DISEASES</th>
<th>INPATIENT:</th>
<th>OUTPATIENT:</th>
<th>CONSULTATION:</th>
<th>PRIMARY CARE:</th>
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<tbody>
<tr>
<td>1. Pneumonia</td>
<td>75%</td>
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<td>2. Urinary tract infections</td>
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<td>25%</td>
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<td>3. Sepsis</td>
<td></td>
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<td>70%</td>
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<td>4. Intraabdominal &amp; wound infection</td>
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<td></td>
<td>30%</td>
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<td>5. Fungal diseases</td>
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<tr>
<td>6. Endocarditis</td>
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<tr>
<td>7. Meningitis</td>
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<tr>
<td>8. Fever of unknown origin</td>
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<tr>
<td>9. Infections in the Immunocompromised Host</td>
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<tr>
<td>10. HIV Infection</td>
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<td>11. Mycobacterial Infections</td>
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<tr>
<td>12. Travel-related and Tropical Infections</td>
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**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:** 5-10

**TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:** 45-60

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

1. Understanding pathogenesis of infection and host defense mechanisms and responses to infection.
2. Knowledge of the epidemiology, etiology, pathogenesis, diagnosis, differential diagnosis and management of complex out and in-patient infectious disease problems: pneumonia, urinary tract infections, meningitis, endocarditis, skin and soft tissue infections, bone and joint infections, fever of unknown origin, systemic mycoses, mycobacterial infections surgical infections, prosthetic infections, septic shock, infections in the immunocompromised host and travel and tropical infections including parasitic infections
3. Interpretation of Gram stains, cultures, and serologies; reading of x-rays, radionuclide scans and CT's and MRI's.
4. Knowledge of the basic pharmacology and use of antimicrobial agents
5. Knowledge of immunization and other immunoprophylaxis, chemoprophylaxis and prevention of infection.
6. Knowledge about appropriate infection control practices.
7. Understand and review new and emerging infections and the concept of outbreak investigation.
8. Medical judgment, analysis of medical data, and synthesis of information.
9. Ability to obtain and document detailed, pertinent, focused and independent history and physical examinations.
10. Learn the appropriate format for writing consultations.
11. Oral presentation of cases.
12. Understand the discharge planning of communicable disease cases

**TYPICAL WEEKLY SCHEDULE**

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<tr>
<th>Hour</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8:00-9:00 Morning Report</td>
<td>8:00– 9:00 Morning Rpt</td>
<td>8:00 – 9:00 M and M</td>
<td>8:00 – 9:00 M and M</td>
<td>9:00– 9:30 ID Review Questions</td>
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<td>9:00 – 10:00 In Patient ID Consultation Rnds</td>
<td>9:00–9:30 ID Interactive Topic Discussion</td>
<td>10:00-10:30 ID Lecture alternating with Case Conference</td>
<td>9:00-11:00 Consult Rounds</td>
<td>11:00-12:00 Micro teaching rounds</td>
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<td>10:00–10:30 ID Lecture</td>
<td>9:30-11:00 Consult Rds</td>
<td>10:30-12:00 In Patient ID Consultation Rounds</td>
<td>11:00-12:00 Micro teaching rounds</td>
<td>12:00–1:00 ID Journal Club (4th Thursday)</td>
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<td>10:30-12:00 In Patient ID Consultation Rnds</td>
<td>11:00-12:00 ID Grand Rds</td>
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<td>12:00–1:00 ID Grand Rounds (Harbor-UCLA)</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Inpatient I.D. Consult and Teaching Rnds</td>
<td>1:30 – 3:00 Teaching Rounds</td>
<td>12:00–1:00 M and M</td>
<td>1:00–3:00 ID Clinic</td>
<td>12:00 – 1:00 In Patient ID Consultation and Teaching Rnds</td>
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<td>2:00– 5:00 Inpatient I.D. Consult and Teaching Rnds</td>
<td>3:00 – 5:00 Inpatient I.D. Consult and Teaching Rnds</td>
<td>1:30 – 3:30 Comb. ID Intercity Rds (3rd Wed)</td>
<td>3:00–5:00 In Patient ID Consultation Rnds</td>
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<td>3:30–5:00 In Patient ID Consultation Rnds</td>
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<td>5:00–6:00 Research Seminar 2nd Wed</td>
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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** One weekend day rounds with fellow as necessary. Students invited to participate in dinner seminars as they arise.

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** Service gives students higher than average responsibility for providing patient consultative services; students function at the level of interns.
ME350.02 PRIMARY CARE MEDICINE

Subinternship Location: ASSOC (BAKERSFIELD)  2006–2007
Revised: 11/21/06

COURSE CHAIR:
Pritam Badesha, M.D.  (661) 632-1801

SUPPORTING FACULTY:
Jose A. Perez, Jr., M.D.
Program Director

STUDENT COORDINATOR:
Pritam Badesha, M.D.  (661) 632-1801
E-MAIL: pritam.badesha2@med.va.gov

REPORT TO: Dr. Badesha, VA Greater LA HS, Bakersfield Amb.
Care Center, Rm. 803, 9:00 a.m. first day

PREREQUISITES: Medicine, Surgery

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

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.

COURSE 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

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: 0%
PRIMARY CARE: 100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:
OP 40; IP 8

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:
OP 125; IP 50

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>Seminar w/ Attending Patient Care</td>
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<td>PM</td>
<td>Conference Preceptor Rounds Check Out</td>
<td>Conference Discussion of Major Diseases Check Out</td>
<td>Conference Preceptor Rounds Check Out</td>
<td>Conference Discussion of Major Diseases Check Out</td>
<td>Conference Preceptor Rounds Check Out</td>
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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. *Weeks are flexible. Percentages are flexible, inpatient never to exceed 85%.

212
ME351.01  AMBULATORY INTERNAL MEDICINE

Subinternship Location: SVA

2006–2007

Revised: 1/4/06

COURSE CHAIR:
Arthur Gomez, M.D.
(818) 891-7711 x5129

SUPPORTING FACULTY:
Drs. D. Garcia, G. Michelini

STUDENT COORDINATOR:
Dr. Giulia Michelini
(818) 891-7711 x5325
E-MAIL: giulia.michelini@med.va.gov
FAX: (818) 895-9571

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

PREREQUISITES: Medicine, Surgery

AVAILABLE TO EXTERNS: yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: This elective is designed to provide the student with a stimulating ambulatory care and private office-like experience. The student will have his/her own consultation and examining room and determine his/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).

COURSE 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.

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 WEEK BY STUDENT: 38
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 2,500

TYPICAL WEEKLY SCHEDULE

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<tr>
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<tr>
<td>AM</td>
<td>8:00</td>
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<td>8:00</td>
<td>Behavioral Medicine</td>
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<td></td>
<td>Morning Report</td>
<td>Morning Report</td>
<td>Morning Report</td>
<td>Cardiology Clinic</td>
<td>Morning Report</td>
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<td>General Medicine Clinic</td>
<td>Rheum Clinic</td>
<td>Sigmoid Clinic</td>
<td>General Medicine Clinic</td>
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<td>Noon Lecture</td>
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<td>General Medicine Clinic</td>
<td>Dermatology Clinic</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME356.01 GERIATRIC MEDICINE

Subinternship Location: CHS

COURSE CHAIR: PHONE #:
Bruce Ferrell, M.D. (310) 825-8253

SUPPORTING FACULTY:

STUDENT COORDINATOR: PHONE #:
Maribel Garcia (310) 825-8253
E-MAIL: maribelgarcia@mednet.ucla.edu

REPORT TO: Call Maribel Garcia one week before the first day of clerkship for assignment.

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION:
In this elective, we attempt to increase the fourth-year 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 under close faculty supervision.

COURSE 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.

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

STUDY EXPERIENCES

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 10%
PRIMARY CARE: 90%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
OTHER

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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<th>Hour</th>
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<td>PM</td>
<td>Days 1–10 New Hospital Admissions Days 11–21 Outpatients</td>
<td>Days 1–10 New Hospital Admissions Days 11–21 Outpatients</td>
<td>Days 1–10 New Hospital Admissions Days 11–21 NH Rounds</td>
<td>Days 1–10 Conferences Days 11–21 Conferences Days 11–21 Outpatient</td>
<td>Days 1–10 New Hospital Admission Days 11–1 Outpatient</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Orientation will occur with inpatient attending at 9:30 a.m. in the Geriatric Medicine office stn floor 3 corridor. 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.
STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Dementia
2. Affective disorder
3. Stroke rehabilitation
4. Falls, gait, and balance
5. Urinary tract problems
6. Fever and Infection in Nursing Home Residents
7. Pneumonia
8. Prevention and Treatment of Skin Ulcers
9. Nutrition in the frail elderly

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 20

TYPICAL WEEKLY SCHEDULE

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<td>Wound Rounds</td>
<td>Geropsychiatry Rounds</td>
<td>Attending Rounds</td>
<td>Medical Grand Rounds</td>
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<td>Geropsychiatry Rounds</td>
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<td>Interdisciplinary Team Rounds</td>
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<td>Geriatric Fellowship Rounds</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 Nursing Home 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. Issues of end of life care are explored.
DESCRIPTION: Home Based Primary Care at Sepulveda is a model home care service, incorporating interdisciplinary team assessment and management principles to provide and enhance health care for the elderly. Students will be assigned primary care responsibilities for a panel of home bound patients, and they will make home visits with the Geriatrics Fellow and the Attending. They will attend interdisciplinary team conference weekly. They will give 1 brief talk on a Geriatric topic at the end of the rotation.

ME356.04 GERIATRIC MEDICINE: HOME CARE

COURSE CHAIR: Nancy Weintraub, M.D. (818) 895-9311
SUPPORTING FACULTY: Drs. Lawrence Rubenstein, Cathy Alessi, Sam Murray, Charles Marshall, Mark Rosenthal, Debra Saliba
STUDENT COORDINATOR: Nancy Weintraub, M.D. (818) 895-9311 E-MAIL: Nancy.Weintraub @med.va.gov

REPORT TO: Dr. Nancy Weintraub, Bldg. 25, Room B 132 at 9:00 a.m.

PREREQUISITES: Inpatient & Ambulatory Internal Medicine and Surgery

AVAILABLE TO EXTERN: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45

COURSE OBJECTIVES (in order of importance)
1. Knowledge of the biological psychological and social aspects of aging.
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. Development of an understanding of issues unique to Home Care, inc. timing of hospitalization, end of life care, management of complex medical problems at home, caregiver stress, home safety, etc.
5. Develop Clinical skills: improving medical interviewing and physical examination with emphasis on functional assessment and approaches to assessing the elderly patient and the home.
6. Improve Medical decision making: emphasis on altered presentation of disease, multiple illness, cost-benefit factor, rehabilitative potential, and ethical issues.
7. Improve doctor-patient relationship, communication skills, and interaction with the elderly patient and care-givers.
8. Interpretation of tests: appreciation of normal parameters with aging and cost-effective use of diagnostic interventions.
9. Become familiar with work-up and management of common problems of geriatric patients and in the home setting.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Dementia
2. Affective disorder
3. Parkinson’s Disease
4. Falls, gait, and balance
5. Urinary tract problems
6. Fever and Infection in Home-Bound patients
7. Pneumonia
8. Prevention and Treatment of Skin Ulcers
9. Nutrition in the frail elderly

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH BY STUDENT: 25
TOTAL # OF PATIENTS EVALUATED EACH MONTH BY ENTIRE SERVICE: 60

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00</td>
<td>9:00</td>
<td>Sepulveda HBPC office home visits</td>
<td>8:00 Sepulveda Medicine Grand Rounds</td>
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<td>Sepulveda HBPC Interdisciplinary Team Meeting</td>
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<td>3:00 – 5:00 Geriatrics Fellowship Rounds</td>
<td>Sepulveda HBPC office home visits</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME360.05 NEPHROLOGY

Advanced Clinical Clerkship  Location: KDMC  2006–2007 Revised: 12/5/05

COURSE CHAIR:  PHONE #: Ajay Gupta, M.D.  (310) 668-3177

SUPPORTING FACULTY:  
Drs. A. Gupta, J. Wang, K. Norris, & J. Sharif

STUDENT COORDINATOR:  PHONE #: Linda Elliott  (310) 668-3177
E-MAIL: lelliott@ladhs.org

REPORT TO:  
Harry J. Ward, M.D., Room #2197 H. Hawkins Building. 8:30 a.m.

PREREQUISITES: Medicine and Surgery

COLLEGES REQUIREMENT:  Urban Underserved

AVAILABLE TO EXterns: Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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 work-up 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 five patients per week, work-up each patient, and present and discuss the findings with the renal faculty. For inpatient work-ups 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.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute renal failure
2. Chronic renal failure
3. Hypertensive renal disease
4. Nephrotic syndrome
5. Fluid-electrolyte problems
6. Urinary tract infection
7. Toxic nephropathy
8. Dialysis Complications

INPATIENT: 70%
OUTPATIENT: 30%
CONSULTATION: 90%
PRIMARY CARE: 10%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X RESIDENTS
X INTERNS
X OTHER: Renal Radiologists

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 25 Inpatient; 50 Outpatient

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>8:00 – 10:00 Consult Rounds</td>
<td>8:00 – 10:00 Consult Rounds</td>
<td>8:00 – 12:00 Renal Clinic</td>
<td>8:00 – 12:00 Hypertension Clinic</td>
<td>8:00 – 10:00 Pathophysiology Conference (VA Medical Center) 10:00 – 12:00 Chief’s Rounds</td>
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<td>11:00 – 12:00 Grand Rds (Int. Med.)</td>
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<td>PM</td>
<td>1:00 – 2:00 Topic Discussion 2:00 – 5:30 Attending Rounds and Case Discussions</td>
<td>1:00 – 2:00 Renal Biopsy Conference 2:00 – 5:30 Attending Rounds and Case Discussions</td>
<td>1:00 – 2:00 Topic Discussion 2:00 – 5:30 Attending Rounds and Case Discussions</td>
<td>1:00 – 2:00 Renal Grand Rounds 2:30 – 5:00 Consult Rounds</td>
<td>1:00 – 2:00 Topic Discussion 2:00 – 5:00 Attending Rounds and Case Discussions</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Each student is expected to give a high level of performance. At Journal Club, they will be expected to research and lead the discussion of the assigned topic. Students are encouraged to participate in clinical and basic research activities of the Division.
ME410.01  CARDIOLOGY

Subinternship/Inpatient  Location:  CHS  2006–2007  Revised: 7/19/06

COURSE CHAIR:  PHONE #:
Janine Krivokapich, M.D.  (310) 825-5486

SUPPORTING FACULTY:
CCU- Drs. Middlekauff, Tillisch, Goldhaber, Weiss, Honda, Bostrom, Cesario, Watson and MacLellan

STUDENT COORDINATOR:  PHONE #:  E-MAIL:
Ronald Lopez  (310) 794-9736  ronaldlopez@mednet.ucla.edu

REPORT TO:
Room 67-134 CHS, 9:00 a.m.

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

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 2  min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
12,15,18,21,27,30,33,36,39,42,45

DESCRIPTION:
Each student will spend three weeks as a sub-intern on the Cardiac Care Unit and will work up and 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 night.

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

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 7
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: >70

TYPICAL WEEKLY SCHEDULE

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<td></td>
<td>7:45 – 8:15 CCU Conference</td>
<td>7:45 – 8:15 CCU Conference</td>
<td>8:30 – 9:30 Grand Rounds</td>
<td>7:45 – 8:15 CCU Conference</td>
<td>7:45 – 8:15 CCU Conference</td>
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<td>9:00 – 10:30 CCU Rounds with Attending</td>
<td>9:00 – 10:30 CCU Rounds with Attending</td>
<td>9:30 – 11:30 CCU Rounds with Attending</td>
<td>9:00 – 10:30 CCU Rounds with Attending</td>
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<td>12:00 – 1:00 Core Curriculum Conference</td>
<td>5:00 – 6:00 Cardiac Cath. Conference</td>
<td>12:00 – 1:00 Diagnostic Techniques Conf.</td>
<td>12:00 – 1:00 Clinical Case Conference</td>
<td>12:00 – 1:00 Ground Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:
Students will have night call every third night with CCU Resident. CCU Rounds from 8:30 – 10:30 a.m., Saturdays and Sundays.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME410.03 CRITICAL (CORONARY) CARE UNIT

Subinternship/Inpatient Location: KDMC

2005-2006 Revised: 12/19/05

COURSE CHAIR: PHONE #: Vidya S. Kaushik M.D. (310) 668-4556
SUPPORTING FACULTY: Drs. V. Bhasin, G. Marks, & C. Aranguri, ICU faculty: Drs. Zopey, Carpio, and Patel

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

REPORT TO: Dr. Kaushik @ 8:00 a.m. in room 4N3

PREREQUISITES: All core clerkships

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2005 - 2006 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45

COURSE OBJECTIVES (in order of importance)
1. Diagnosis and management of complex inpatient problems such as acute myocardial infarction, congestive heart failure, acute respiratory failure, renal failure electrolyte disorders, GI bleeding, and sepsis.
2. Knowledge of pathogenesis, natural history and evaluation of cardiac and respiratory failure, and the multi-system problems of critically ill patients.
3. Interpretations of EKG, arterial blood gases, electrolytes, 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 critical care.
8. Consideration of ethical issues in life-support and other decisions.

DESCRIPTION: The student shares primary responsibility with interns and a senior resident for 24-hour coverage of a six-bed critical (coronary) care unit. Teaching activities include daily rounds with unit team, cardiology fellow, and attending physician. Patients are acutely ill, often with cardioiology fellow and attending physician. Patients are acutely ill, often with multiple system failure, although they primarily have cardiac diseases.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute coronary syndromes, myocardial infarction, congestive heart failure
2. Acute respiratory failure
3. GI bleeding
4. Shock
5. Sepsis
6. Hepatic failure
7. Acute renal failure
8. Electrolyte imbalance

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

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 25-30

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 - 9:00 Morning Report 9:00 - 11:00 CCU and Teaching Rounds</td>
<td>9:00 - 11:00 CCU and Teaching Rounds</td>
<td>8:00 - 9:00 M and M 9:00 - 11:00 CCU and Teaching Rounds</td>
<td>8:00 - 9:00 Morning Report 9:00 - 11:00 CCU and Teaching Rounds</td>
<td>Board Review CCU and Teaching Rounds</td>
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<td>12 noon: lunch conference: room 4009 1:00 - 5:00 Consults/Procedures, EKG</td>
<td>1:00 - 5:00 Consults/Procedures, EKG 4M Cardiology Clinic</td>
<td>12 noon: lunch conference: room 4009 1:00 - 5:00 Consults/Procedures, EKG</td>
<td>3:00-4:00 Cath Conference Room 4009</td>
<td>12 noon: lunch conf.: room 4009 1:00 - 5:00 Consults/Procedures, EKG</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night call with assigned resident and intern

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR:  Dennis Yick, M.D.  (818) 364-3205  
SUPPORTING FACULTY:  Drs. Janet Au, Susan Stein, Dennis Yick, Nader Kamanger  
STUDENT COORDINATOR:  Mark DeVany (818) 364-3205  E-MAIL:  mdevany@ladhs.org  
REPORT TO:  Olive View Medical Center, Room 2B182 at 8:00 a.m.  
PREREQUISITES:  Medicine and Surgery  
AVAILABLE TO EXTERNS:  Yes  
STUDENTS / PERIOD:  max 1 min 1  
DURATION:  3 weeks  
2006–2007 ROTATIONS BEGIN WEEKS:  2,5,8,11,14,17,20,27,30,33,36,39,42,45  
DESCRIPTION:  This elective is in a critical care unit at a county hospital.  The unit is a combined MICU and CCU.  The student will have  
direct patient responsibility with a variety of diseases including GI Bleed, unstable angina, diabetic ketoacidosis, and respiratory failure.  
STUDENT EXPERIENCES  
COMMON PROBLEMS/DISEASES  
1.  GI Bleed  
2.  Chest pain  
3.  Congestive heart failure  
4.  Respiratory failure  
5.  Diabetic ketoacidosis  
STUDENT EXPERIENCES (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  
and thoracentesis.  
5.  To gain experience in managing patients on ventilators.  
APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  4 – 5  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  25  
TYPICAL WEEKLY SCHEDULE  
ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  On call is every third night with MICU team.  Students will have at least one day off.  
ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME440.01  HEMATOLOGY-ONCOLOGY

Subinternship/Inpatient  Location: CS  2006–2007  Revised: 12/12/05

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

SUPPORTING FACULTY:
Dr. Michael Lil

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

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

PREREQUISITES: Medicine and Surgery

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 1 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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.

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. 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 WEEK/STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>8:00 – 10:30 Work Rounds</td>
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<td>8:00 – 10:30 Work Rounds</td>
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<td>Grand Rounds</td>
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<td>8:30 — 9:30 Grand Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 Noon Conference</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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<td>Work Rounds</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>2:00 – 3:00 Heme./Onc. Lectures</td>
<td>Work Rounds</td>
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<td>2:00 – 3:00</td>
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<td>3:00 – 5:00 Outpatient Clinic</td>
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</table>

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE OBJECTIVES (in order of importance)
To improve:

1. History and physical examination.
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).
7. Knowledge of cerebrovascular disease, renal failure, diabetes, collagen vascular disorders, pneumonias, peptic ulcer disease, chronic obstructive pulmonary disease, AIDS.

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

STUDENT EXPERIENCES
COMMON PROBLEMS/DISEASES
1. Renal diseases
2. Cerebrovascular disease
3. Respiratory failure
4. Diabetes mellitus
5. Pneumonia
6. Peptic ulcer disease
7. Chronic obstructive pulmonary disease
8. AIDS

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 23

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 Morning Report</td>
<td>8:00 Morning Report</td>
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<td>8:00 Intake Rounds</td>
<td>8:30 Medical Grand Rnds</td>
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<td>9:00 Work Rounds</td>
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<td>PM</td>
<td>12:00 Medicine Conference</td>
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<td>1:00 – 6:00 Patient Care Activities</td>
<td>1:00 – 6:00 Patient Care Activities</td>
<td>1:00 – 6:00 Patient Care Activities</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: The student will take night call in the hospital every fourth night, working with a house officer. In general, s/he will be assigned patients in rotation with the intern. Weekend night call will occur approximately twice a rotation.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE 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.

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5

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

TYPICAL WEEKLY SCHEDULE

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<td>AM</td>
<td>7:30 – 9:30 Rounds</td>
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<td>10:30 – 12:00 Attending Rounds</td>
<td>8:30 – 9:30 Medical Grand Rounds</td>
<td>10:30 – 12:00 Attending Rounds</td>
<td>9:30 – 10:30 Morning Report</td>
<td>10:30 – 12:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 – 1:00 House Staff Lecture Series</td>
<td>New Patient Workups</td>
<td>12:00 – 1:00 Primary Care Conference</td>
<td>12:00 – 1:00 Morbidity &amp; Mortality Conference</td>
<td>12:00 – 1:00 Intern Report</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fifth night with admitting team. Schedule overall is that of the ward team.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Attendance and participation in various conferences, lectures, and subspecialty rounds are encouraged. If absent more than one week no credit will be given.
ME450.03  INTERNAL MEDICINE

Subinternship/Inpatient  Location: ST.MARY  2006–2007
Revised: 12/19/05

COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)
Chester Choi, M.D.  (562) 491-9350
1.  Improve clinical skills
SUPPORTING FACULTY:  PHONE #:
C. Choi, M.D., H. Guu, M.D., and Staff
2.  Improve evidence based medical decision making ability
STUDENT COORDINATOR:  PHONE #:
Sylvia Perez  (562) 491-9350
3.  Develop proficiency in the interpretation of diagnostic tests
REPORT TO:  Department of Medical Education, 3 West, 1050
4.  Improve knowledge base in clinical pharmacology
Linden Ave., Long Beach, CA 90813.
5.  Learn how to provide effective medical consultations to non-
    medical services
6.  Learn how to manage medical complications of pregnancy

PREREQUISITES:  Medicine, Surgery
AVAILABLE TO EXTERNALS:  Yes
STUDENTS / PERIOD:  max 2  min 1
DURATION:  3 weeks
2006–2007  ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

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

STUDENT EXPERIENCES

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  3
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  8

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>8:00 Morning Report</td>
<td>8:00 Intern/student</td>
<td>8:00 Morning Report</td>
<td>8:00 Medical Clinic</td>
<td>8:00 Intern/student</td>
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<td>9:30 Work Rounds w/Residents</td>
<td>Morning Report</td>
<td>9:30 Work Rounds w/Residents</td>
<td>9:30 - 12:00 Work Rounds w/Residents</td>
<td>Morning Report</td>
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<td>11:30 Teaching Attending Rounds</td>
<td>9:30 Work Rounds w/Residents</td>
<td>11:30 Teaching</td>
<td>12:30 Noon Conf. Didactic Teaching</td>
<td>9:30 Work Rounds w/Residents</td>
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<td>11:30 Work Round w/Residents</td>
<td>Attending Rounds</td>
<td>12:30 Noon Conf. Didactic Teaching</td>
<td>11:30 Teaching Attending Rounds</td>
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<td>1:30 New Admissions &amp; Patient Care</td>
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<td>4:00 Sign-out rounds Patient Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  On call with house staff every sixth night is optional.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will assume responsibilities of a clinical clerk on a general medicine service. 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 2006–2007
Revised: 11/17/05

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

SUPPORTING FACULTY:
Samuel Burstein, M.D.

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

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

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 5 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45

COURSE OBJECTIVES (in order of importance)
1. Diagnosis, understanding and management of diseases (cardiac, pulmonary, infectious, gastrointestinal, renal), and metabolic disturbances, either singly or in a multisystem fashion, inclusive of most internal medicine and subspecialities.
2. Improved history and physical techniques, stressing the ability to focus and prioritize.
3. Diagnosis and management of complex in-patient problems.
4. Development of oral presentation skills in a conference setting.
5. Improving doctor-patient relationships.
6. 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 and the limits of medical care.

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

STUDENT EXPERIENCES

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

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

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

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

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

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:30 Ward Rounds 8:30 Case Conference 9:00 Morning Report 10:00 Attending Rounds</td>
<td>7:30 Ward Rounds 8:30 Case Conference 9:00 Morning Report 10:00 Attending Rounds</td>
<td>7:30 Ward Rounds 9:00 Morning Report 10:00 Attending Rounds</td>
<td>7:30 Ward Rounds 8:30 Case Conference 9:00 Morning Report 10:00 Attending Rounds</td>
<td>7:30 Ward Rounds 8:30 Case Conference 9:00 Morning Report 10:00 Attending Rounds</td>
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<tr>
<td>PM</td>
<td>Noon Conference 1:00 Patient Management Subspecialty Lectures</td>
<td>Interns Case Conference 1:00 Patient Management</td>
<td>Medical Grand Rounds 1:00 Patient Management</td>
<td>Journal Club/Other 1:00 Patient Management</td>
<td>Noon Conference 1:00 Patient Management</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Students will take call with their team every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: This elective provides excellent preparation for a medical or surgical internship and lays the groundwork for other medical specialties. The rotation emphasizes student autonomy and responsibility under the watchful eyes of a resident and staff physician. The student will be the primary physician for the patients they work-up and follow. The student will be expected to attend the noon-day conferences and present cases on attending rounds.
ME450.05  INTERNAL MEDICINE

Subinternship/Inpatient  Location:  KAISER.SUN  COURSE OBJECTIVES (in order of importance)

COURSE CHAIR:  PHONE #:  COURSE CHAIR:  PHONE #:  COURSE OBJECTIVES (in order of importance)

SUPPORTING FACULTY:  Dr. Peter Chee, and the Staff of the Department of Internal Medicine

STUDENT COORDINATOR:  PHONE #:  Steve Valencia (323) 783- 4516

REPORT TO: Center for Medical Education, 4733 Sunset Blvd, 3rd Fl. West Mezzanine, 8:30 a.m. Then to the Residency Secretary at 4950 Sunset, 6th Floor

STUDENT COORDINATOR:  PHONE #:  Steve Valencia (323) 783- 4516

PREREQUISITES:  Medicine & Surgery

AVAILABLE TO EXTERNs:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES INPATIENT: 100%  CLOSE CONTACT WITH:
1. Coronary artery disease  OUTPATIENT: 0%  X  FULL TIME FACULTY
2. COPD and asthma  CONSULTATION: 0%  X  CLINICAL FACULTY
3. Pneumonia PRIMARY CARE: 100%  X  FELLOWS
4. Sepsis  X  RESIDENTS
5. GI bleeding  X  INTERNS
6. Cerebrovascular disease  OTHER
7. Renal failure
8. AIDS

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  5

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

TYPICAL WEEKLY SCHEDULE

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<td>Hematology/ Renal Conference</td>
<td>Internal Medicine Education Conference (Grand Rounds) 3 Hrs.</td>
<td>Cardio Conf</td>
<td>Id/Onc Conf.</td>
<td>GI Conf.</td>
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<tr>
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<td>Patient Care</td>
<td>EKG Conference</td>
<td>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.
ME450.06  GENERAL INTERNAL MEDICINE

STUDENT COORDINATOR: PHONE #:
Mark DeVany (818) 364-3205
E-MAIL: mdevany@ladhs.org

REPORT TO: Olive View Medical Center, Dept. of Medicine
Office, Room 2B-182 at 8:00 am.

AVAILABLE TO EXTERNS: Yes

PREREQUISITES: Medicine and Surgery

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

CLOSE CONTACT WITH:

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

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

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

TYPICAL WEEKLY SCHEDULE

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<tbody>
<tr>
<td>AM</td>
<td>7:00 – 8:00 Preround</td>
<td>7:00 – 8:00 Preround</td>
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<td>1:00 – 5:00 Patient Care</td>
<td>1:00 – 5:00 Patient Care</td>
<td>4:00 – 5:30 Ward Work</td>
<td>3:00 – 5:30 Ward Work</td>
<td>3:00 – 5:30 Ward Work</td>
</tr>
</tbody>
</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: Subinterns have primary responsibility for patient care, with close supervision by members of the ward team.
ME452.01 INPATIENT MEDICINE

Subinternship/Inpatient Location: CHS

COURSE CHAIR: PHONE #:
Neil H. Parker, M.D. (310) 825-6774

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

STUDENT COORDINATOR: PHONE #:
Jonathan David (310) 825-5846 E-MAIL: jdavid@mednet.ucla.edu

REPORT TO:
Chief Resident, 8:30 a.m., 32-115 CHS at morning report

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

AVAILABLE TO EXTERNALS: Yes

STUDENTS / PERIOD: max 4 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

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 four 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

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<td>9:30 – 10:30 Resident Work Rnds 10:00 – 12:00 Attending Rounds</td>
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<td>11:15 – 12:00 Discharge Planning Rounds</td>
<td>9:30 – 10:30 Resident Work Rnds 10:00 – 12:00 Attending Rounds</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 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.
ME455.01  MEDICAL INTENSIVE CARE UNIT (MICU)

Subinternship/Inpatient  
Location: CHS  

2006–2007  
Revised: 11/28/05  

COURSE CHAIR:  
Michael Keane, M.D.  
(310) 794-1999  

SUPPORTING FACULTY:  
Pulmonary & Critical Care Faculty  

STUDENT COORDINATOR:  
Heather McGinn  
(310) 825-5615  
E-MAIL: hmcginn@mednet.ucla.edu  

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

PREREQUISITES:  
Medicine and Surgery  

AVAILABLE TO EXTERNALS:  
Yes  

STUDENTS / PERIOD:  
max 2 min 1  

DURATION: 3 weeks  

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45  

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

COURSE OBJECTIVES (in order of importance)  
1. Knowledge of the pathogenesis, natural history, diagnosis, and management of common medical emergencies such as respiratory failure, shock, GI hemorrhage, drug overdose, renal failure, coma, etc.  
2. Interpretation of blood gases, EKGs, chest radiographs, hemodynamic parameters, etc.  
3. Knowledge of the clinical pharmacology of bronchodilators, cardiovascular drugs, oxygen, antibiotics, etc.  
4. Knowledge of the use of mechanical ventilators and other aspects of respiratory therapy.  
5. Knowledge of nutrition and metabolism in the critically ill, including prescription of nutritional supplementation.  
6. Performance of arterial punctures and catheterization, airway adjuncts, $O_2$ 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.  

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3  
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 10  

TYPICAL WEEKLY SCHEDULE  

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<td>Critical Care Conference</td>
<td>Pulmonary Clinical Conference</td>
<td>Psyche Social Conference</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  
On call every fourth day and night along with medical resident. Saturday and Sunday: Attending rounds from 8:00 – 11:00 a.m. 

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  
Sleeping quarters are available in the MICU. Although usually a busy rotation, the patient load may be variable at times; weeks #17-19 may be relatively “slow.” To achieve further clinical competence in pulmonary medicine, see Appendix II of The UCLA Pulmonary Curriculum: An Overview and a Respiratory Care Curriculum (Biomedical Library catalogue numbers: WF 18, 6588u, 1981). * Optional.  

229
**COURSE CHAIR:** Lawrence Maldonado, M.D.  
PHONE #: (310) 423-4684

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

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

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

**PREREQUISITES:** Medicine and Surgery

**AVAILABLE TO EXTERNALS:** Yes

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

**DURATION:** 3 weeks

**2006–2007 ROTATIONS BEGIN WEEKS:** (June through August by arrangement)  
8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

**COURSE OBJECTIVES (in order of importance):**

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

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

**STUDENT EXPERIENCES**

**COMMON PROBLEMS/DISEASES**

1. Acute myocardial infarction & failure
2. Septic shock
3. GI hemorrhage
4. Complicated respiratory failure
5. CNS catastrophes
6. Drug intoxications
7. Acute renal failure
8. Acid-based and electrolyte imbalance

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

**APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK/STUDENT:** 3 – 5

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

**TYPICAL WEEKLY SCHEDULE**

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**ON-CALL SCHEDULE & WEEKEND ACTIVITIES:** Students on this elective will be on call every third night and will participate during weekend rounds.

**ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:** Each student will be assigned to a team consisting of a resident and an intern on-call every third night. The students will be under the supervision of full-time attendings and private physicians. Daily work rounds are held with the attending physician and fellow in critical care medicine. Numerous subspecialty consultants from the private and full-time attending staff are available. In addition, formal didactic conferences will be given four times weekly.

230
ME455.03 RESPIRATORY INTENSIVE CARE

Subinternship/Inpatient Location: CS

2006–2007 Revised: 1/3/06

COURSE CHAIR: Michael Lewis, M.D. (310) 423-1835

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

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

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 15

TYPICAL WEEKLY SCHEDULE

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<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>11:00 – 12:00 RICU Core Curriculum</td>
<td>10:00 – 12:00 RICU Teaching Rounds</td>
<td>RICU Core Curriculum</td>
<td>11:00 – 12:00 RICU Core Curriculum</td>
<td>10:00 – 12:00 RICU Teaching Rounds</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: On call every fourth day and night. Saturday and Sunday rounds 8:00 – 10:00 a.m.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: A pulmonary fellow is available at all times. Daily rounds with one of the faculty, informal sessions with RICU pulmonary fellows, and scheduled conferences should expose students to an extensive review of pulmonary diseases and applied respiratory physiology.
ME455.04  CARDIAC INTENSIVE CARE UNIT

2006–2007  Revised: 12/7/05

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

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

STUDENT COORDINATOR:  Judy Jacobs  PHONE #:  (310) 423-4658  FAX:  (310) 423-5200

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

PREREQUISITES:  Medicine, Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 3 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

DESCRIPTION:  In the Coronary Intensive Care Unit, the rotating students function as subinterns and are on call every sixth night. The team of 1 resident, 1 intern, and 1 or 2 students usually admit anywhere from 3 to 5 patients. There is also a cardiology fellow present 24 hours a day in the unit. The students assume full responsibility for workup of the patients, preparation of the plan of treatment. They are also encouraged to participate in the procedures under the proper supervision. The teams round daily every morning with the full-time attending. The students are expected to present their patients. They examine the patient with the attending and discuss the plan of action. In the afternoon during sign-out rounds with the cardiology fellow and full-time attending, the patients are presented in a brief form to the team on call for proper continuation of care. Every afternoon, there are lectures oriented to the pathology of the patients admitted to the CICU. Every day there is also a medical teaching conference or an EKG Core Lecture organized specifically for the rotating students in the CICU.

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

TYPICAL WEEKLY SCHEDULE

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<td>Clinical pre-rounds with postcall team, fellow/resident/intern</td>
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<td>Clinical pre-rounds with postcall team, fellow/resident/intern</td>
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<td>8:00-11:30</td>
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<td>Rounds with the attending, bedside rounds. Review of studies.</td>
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OTHER

CLOSE CONTACT WITH:

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

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

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME455.05 MEDICAL/PULMONARY INTENSIVE CARE

Subinternship/Inpatient  
Location: WV

COURSE CHAIR:  
Guy Soohoo, M.D.  
(310) 268-3021  
FAX#: (310) 268 4712

SUPPORTING FACULTY:  

STUDENT COORDINATOR:  
Caroline Bruce  
(310) 268-3021  
E-MAIL: caroline.bruce@med.va.gov

REPORT TO:  
Guy Soohoo, M.D., Bldg. 500, Room 3013 @ 8:30 a.m.

PREREQUISITES:  
Medicine and Surgery

AVAILABLE TO EXTERNS:  
Yes

STUDENTS / PERIOD:  
max 3 min 1

DURATION:  
3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE 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 and utilization of mechanical ventilation
4. Indications, applications, and utilization of invasive monitoring, including pulmonary-artery catherization.
5. Arterial blood gas analysis and interpretation of mixed metabolic disturbances.
6. Understanding the rational use of pressors, inotropes, antibiotics, anti-arrhythmics, oxygen, steroids, etc., in the critically ill patient.
7. Appreciation of the team approach to the critically ill patient.

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.

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

CLOSE CONTACT WITH:

X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER Critical care nurses

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.

APPRAOCH # OF PATIENTS EVALUATED EACH WEEK BY STUDENT:  
3

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  
28

TYPICAL WEEKLY SCHEDULE

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<td>9:00 – 9:30 X-Ray Rounds</td>
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<td>11:30 ICU Lecture</td>
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<tr>
<td>PM</td>
<td>Noon Conference</td>
<td>Intern Case Conf.</td>
<td>Medical Grand Rnds.</td>
<td>Noon Conference</td>
<td>Noon Conference</td>
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</table>

233
ME455.06  CARDIAC INTENSIVE CARE

Subinternship/Inpatient Location: WVA 2006–2007 Revised: 12/5/05

COURSE CHAIR:  PHONE #:  Bramah Singh, M.D.  (310) 268-3646

SUPPORTING FACULTY:  
Drs. Bersohn, Ebrahimi, Feliclano, Mody, Rubin, Singh, Taggart, Warner, and Shapiro

STUDENT COORDINATOR:  PHONE #:  E-MAIL:  Susan Orrange (310) 268-3646 susan.orrange@med.va.gov

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

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE OBJECTIVES (in order of importance)
1. To provide an opportunity for the student to learn how to perform a proper history and physical examination on patients with cardiac disease.
2. To teach the student how to interpret an electrocardiogram.
3. To provide the student with the fundamentals of diagnosing and managing cardiac 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 tests used in diagnosis and treatment in the CCU, such as cardiac enzymes, arterial blood gases, chest x-rays, echocardiograms, cardiac catheterization and temporary pacemakers.
7. To teach the student the basics of cardiopulmonary resuscitation (CPR).

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Coronary artery disease
2. Acute coronary syndromes/acute MI
3. Pulmonary edema/congestive heart failure
4. Cardiac arrhythmias
5. Valvular heart disease
   4. Acute pericarditis/pericardial tamponade
   5. 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 WEEK BY STUDENT:  4
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  50

TYPICAL WEEKLY SCHEDULE

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<td>CCU Rounds</td>
<td>CCU Rounds</td>
<td>Fellow Core Curriculum</td>
<td>CCU Rounds</td>
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<tr>
<td>PM</td>
<td>12:00</td>
<td>Patient Management</td>
<td>Patient Management</td>
<td>Patient Management</td>
<td>12:00</td>
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<td></td>
<td>Journal Club</td>
<td>Patient Management</td>
<td>4:00 Med-Surgery Cath Conf. (optional)</td>
<td>Patient Management</td>
<td>EKG/Echo/Hemodynamic Conference</td>
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<td></td>
<td>2:00</td>
<td>Nuclear Cardiology Reading</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  On call every fourth night. This includes weekends when call occurs on a weekend evening. Students are expected to attend weekend CCU rounds if they have patients in the unit.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  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 non invasive evaluation of the entire spectrum of cardiac disease. The student should be comfortable with EKG interpretation by the end of the rotation.
COURSE CHAIR:  
Dr. Mihran Garabedian  
PHONE #:  
(323) 783-4516

SUPPORTING FACULTY:  
Critical Care/Pulmonary Medicine Faculty

STUDENT COORDINATOR:  
Steve Valencia  
PHONE #:  
(323) 783-4516  
E-MAIL:  
steve.m.valencia@kp.org

REPORT TO:  
Clerkship Coordinator, Center for Medical Education, 4733 Sunset, 3rd Floor @ 8:30 a.m.

PREREQUISITES:  
Inpatient Internal Medicine and Surgery

AVAILABLE TO EXTERNALS:  
Yes

STUDENTS / PERIOD:  
max 1 min 1

DURATION:  
3 weeks

2005 - 2006 ROTATIONS BEGIN WEEKS:  
2, 5, 8, 11, 14, 17, 20, 27, 30, 33, 36, 39, 42, 45, 48

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

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

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Respiratory failure
2. Cerebrovascular accidents
3. GI hemorrhage
4. Drug overdoses
5. Sepsis
6. Multi-organ failure
7. Mechanical ventilation
8. Cardiovascular problems

INPATIENT:  
100%

OUTPATIENT:  
0%

CONSULTATION:  
0%

PRIMARY CARE:  
100%

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

APPROXIMATE # OF PATIENTS EVALUATED EACH MONTH/STUDENT:  
16

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>8:00 - 10:00 Work Rounds</td>
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<td>10:00 - 12:00 Attending Rounds</td>
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<td>PM</td>
<td>1:00 - 3:00 Work Rounds</td>
<td>1:00 - 5:00 Work Rounds/sign-out Rounds</td>
<td>12:30 - 1:30 Multidisciplinary Rds (Pulmonary, MICU, Thoracic Surgery) 1:30 - 3:00 Work Rds 3:00 - 4:00 Didactic Session 4:00 - 5:00 Work Rds/sign-out Rounds</td>
<td>1:00 - 5:00 Work Rounds/sign-out Rounds</td>
<td>1:00 - 3:00 Work Rounds</td>
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<td>3:00 - 4:00 Didactic session</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  
No overnight call duties. 1 day (8:00 a.m. - 12:00 p.m.) of rounds per weekend on average during the rotation.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
COURSE CHAIR: Behrouz Salehian, M.D.  
PHONE #: (310) 668-6057

SUPPORTING FACULTY: Drs. Rajagopalan, Zopey, Patel, Asuncion, Hanna, V. Kaushik, V. Bhasin, G. Marks, C. Aranguri & M. Caprio

STUDENT COORDINATOR: Janice Harrison  
PHONE #: (323) 563-4595  
E-Mail: jaharrison@ladhs.org

REPORT TO:  
Behrouz Salehian, M.D.

PREREQUISITES:  
Completion of third year core clerkships

AVAILABLE TO EXTERNALS: No

STUDENTS / PERIOD: 2 max 1 min

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45

DESCRIPTION: The student shares primary responsibility with interns and a senior resident for 24-hour coverage of an eight-bed medical intensive care unit. Activities include daily rounds with unit team, working up critical care patients, writing orders, providing diagnostic plans, etc. Patients are acutely ill, often with multiple system failure.

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Acute respiratory failure
2. GI bleed
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 (nurses and technicians)

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 25-30

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>7:30 – 8:00 Morning Report</td>
<td>9:00 – 11:00 MICU Team Rounds</td>
<td>8:00 – 9:00 M&amp;M Conference</td>
<td>7:30 – 8:00 Morning Report</td>
<td>7:30 – 8:00 Morning Report</td>
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<td>9:00 – 11:00 MICU Team Rounds</td>
<td>11:00 – 12:00 Medicine Grand Rounds</td>
<td>9:00 – 11:00 MICU Team Rounds</td>
<td>9:00 – 11:00 MICU Team Rounds</td>
<td>9:00 – 11:00 MICU Team Rounds</td>
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<tr>
<td>PM</td>
<td>12:00 Lunch Conference</td>
<td>1:00 – 2:00 MICU Lecture</td>
<td>12:00 Lunch Conference</td>
<td>12:00 Lunch Conference (tumor board)</td>
<td>12:00 Lunch Conference</td>
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<td>1:00 – 5:00 Procedures, Clinical Care</td>
<td>2:00 – 5:00 Procedures, clinical care</td>
<td>1:00 – 5:00 Procedures, Clinical Care</td>
<td>1:00 – 2:00 MICU Lecture</td>
<td>1:00 – 5:00 Procedures, Clinical Care</td>
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<td>2:00 – 5:00 Procedures, Clinical Care</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Every fourth night call with assigned resident and intern

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: none

236
ME456.01  GERIATRIC MEDICINE

2006–2007  Revised: 12/5/05

COURSE CHAIR:  PHONE #:  
Steven Castle, M.D.  (310) 268-4110

SUPPORTING FACULTY:  
M. Cantrell, S. Dhanani, M. Fang, T. Hahn, D. Norman & D. Yamaguchi and J. Chodash

STUDENT COORDINATOR:  PHONE #:  
Donna Henriques  (310) 268-3474

REPORT TO:  
Bldg. 500, Room 2221 (2 East B), 8:00 a.m. on first day.

PREREQUISITES:  Medicine, Surgery, Neurology, Psychiatry, Radiology

AVAILABLE TO EXTERNALS:  Yes

STUDENTS / PERIOD:  max 2 min 1

DURATION:  3 weeks

2006–2007  ROTATIONS BEGIN WEEKS:  
2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

COURSE OBJECTIVES (in order of importance)
1. To be able to recall etiology of dementia, urinary incontinence; activities of daily living. Analysis of neuropsychological testing in memory impairment, indications for medications vs. potential for adverse drug events vs. application of disease management clinical guidelines. Synthesize and plan for approach to common geriatric syndromes (memory loss, weight loss, loss of function, urinary incontinence, falls, etc.)

2. To be able to demonstrate competency in comprehensive geriatric assessment (history of multiple medical problems, social support and functional assessment, cognition, mood assessment, gait and balance evaluation, etc.). Demonstrate effective interaction in interdisciplinary team meetings and gain insight into how to extract knowledge from other disciplines and how to utilize their skills and focus team members on care plan goals and timeframe. Demonstrate effective communication of care plan, expectations.

3. Open to understanding distinctions between geriatric care and usual medical care of older adults, as well as show understanding, respect, a positive attitude and an understanding for the health and goals of geriatric patients.

DESCRIPTION:  
This is one of the electives of the Multicampus Division of Geriatric Medicine, which encompasses programs at the VAMC West Los Angeles (Wadsworth), VAMC Sepulveda, 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

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

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

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

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE:  5 – 6

TYPICAL WEEKLY SCHEDULE

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<td>10:30</td>
<td>Geriatric Topic Session</td>
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<td>Geriatric Lecture</td>
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<td>Faculty Teaching Rounds</td>
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<td>Medical Service</td>
<td>Multicampus Division Clinical Lecture</td>
<td>Multicampus Division Research Seminar/Journal Club</td>
<td>Medical Service Grand Rounds Patient Workups</td>
<td>Medical Service Lecture Patient Workups</td>
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<td>M &amp; M Conference</td>
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<td>2:00</td>
<td>Team Meeting</td>
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<td>Multicampus Division Research Seminar/Journal Club</td>
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<td>Patient Workups Family Meetings</td>
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<td>Patient Workups</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  No night calls. See assigned patients on weekends.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:  Students will have the opportunity to learn about problems associated with aging through hands-on care under careful clinical supervision with supplemental learning, formal didactic conferences and seminars. Additionally, students will participate and experience the multidisciplinary approach to delivering health care.
DESCRIPTION: The clinical program of Geriatrics and Gerontology has special relevance to inner city minorities and provides an opportunity for outreach programs. The KDMC program includes preventive programs in addition to care of the 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 and outpatient responsibilities.

STUDENT 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 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.
10. Consultations for elderly patients seen in emergency room.
11. Geriatric consultations for inpatient services.
12. To participate in outreach programs designed to offer health screenings to seniors.

STUDENT EXPERIENCES

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
6. Visual, hearing, and dental disorders
7. Elder abuse and other social issues

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 100

TYPICAL WEEKLY SCHEDULE

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No night calls; weekend rounds by arrangement. Faculty Teaching Rounds on Saturday and Sunday mornings. HEART – “Halting Elder Abuse” Response Team. Geriatric Chair Rounds, Saturday, 10:30 – 12:00.

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS: The inpatient services give students an opportunity to provide primary care to acutely ill, hospitalized elderly patients. The purpose is to train students in the peculiarities of the presentation of ailments in older groups with special emphasis on therapeutic strategies.
COURSE OBJECTIVES (in order of importance)
1. Diagnosis and management of complex inpatient problems such as acute respiratory failure, renal failure electrolyte disorders, GI bleeding, and sepsis.
2. Knowledge of pathogenesis, natural history and evaluation of respiratory failure, and the 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.

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 5
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 14

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>7:30 Attending Rounds</td>
<td>8:30 Medical Grand Rounds</td>
<td>7:30 Attending Rounds</td>
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<td></td>
<td>Attending Rounds</td>
<td>Clinical Conference</td>
<td>Dietitian Rounds</td>
<td>10:30 ICU Topic Session</td>
<td>10:30 ICU Topic Session</td>
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<td></td>
<td>Work Rounds</td>
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<td>Medical M&amp;M Conference</td>
<td>Work Rounds</td>
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<td>12:00 Medicine Lecture</td>
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<td>Work Rounds</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.
COURSE CHAIR: Silverio Santiago, M.D.  
PHONE #: (310) 268-3021

SUPPORTING FACULTY:  
Drs. Raj Batra, Steven Dubinett, Ami Oren, Guy Soo Hoo and Michael Littner

STUDENT COORDINATOR: Caroline Bruce  
PHONE #: (310) 268-3021

REPORT TO: S. Santiago, M.D., Bldg. 500, VA Med Center, Room 3013, 8:00 am.

PREREQUISITES: Internal Inpatient Medicine and Surgery

AVAILABLE TO EXTERNS: Yes

STUDENTS / PERIOD: max 2 min 1

DURATION: 3 weeks

2006–2007 ROTATIONS BEGIN WEEKS: 2,5,8,11,14,17,20,27,30,33,36,39,42,45,48

DESCRIPTION: Students will be responsible for the evaluation and continued care of a number of patients with respiratory diseases. They will be under the direct supervision of a pulmonary fellow and will attend daily rounds.

STUDENT EXPERIENCES

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

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

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

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 4

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<th>Hour</th>
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<tbody>
<tr>
<td>AM</td>
<td>Consults</td>
<td>Consults</td>
<td>8:00 Pulmonary Conf.</td>
<td>Consults/Rounds</td>
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<td>Consults/Rounds</td>
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<tr>
<td>PM</td>
<td>Consult Rounds</td>
<td>12:00 Pulmonary Conf. Consult Rounds</td>
<td>Medical Grand Rounds 1:00 – 4:00 Sleep Disorders Clinic</td>
<td>1:00 – 4:00 Chest Clinic 5:00 Pulmonary Conf.</td>
<td>12:00 Pulmonary Conf. Consult Rounds</td>
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</table>

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: N/A

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

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

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

STUDENT EXPERIENCES

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

INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 85%
PRIMARY CARE: 15%
CLOSE CONTACT WITH:
X FULL TIME FACULTY
X CLINICAL FACULTY
X FELLOWS
X RESIDENTS
X INTERNS
X OTHER (Respiratory Therapists)

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 3

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

TYPICAL WEEKLY SCHEDULE

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<tr>
<td>AM</td>
<td>9:00 - noon (2nd, 4th &amp; 5th Mon) or Consult Rounds</td>
<td>9:00 - noon Attending Rounds</td>
<td>9:00 - noon Attending Rounds</td>
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<td>Chest Clinic</td>
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<tr>
<td>PM</td>
<td>1:00 - 4:00 Pulmonary Attending Rounds</td>
<td>2:30 – 4:30 Medical Chest Conference</td>
<td>Procedures/ Bronchoscopies</td>
<td>Bronchoscopies/ Procedures</td>
<td>1:00 – 3:30 Chest Clinic Sepulveda VA</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES: None

ADDITIONAL COMMENTS AND OTHER SPECIAL REQUIREMENTS:
ME470.04  PULMONARY DISEASE AT BARLOW RESPIRATORY HOSPITAL

Subinternship/Inpatient  Location:  ASSOC  

2006–2007  Revised: 12/19/05

COURSE CHAIR:  PHONE #:  
David Nelson, M.D.  (213) 202-6857

SUPPORTING FACULTY:  
Dr. Christopher Ho

STUDENT COORDINATOR:  PHONE #:  
Dianne Wheatley  (213) 202-6860  E-MAIL: dwheatley@barlow2000.org

REPORT TO:  2000 Stadium Way, LA, 1st floor switchboard at 9:00 a.m. Ask for Dianne Wheatley.

PREREQUISITES:  Medicine and Surgery

AVAILABLE TO EXTERNS:  Yes

STUDENTS / PERIOD:  max 1  
DURATION:  3 weeks

2006–2007 ROTATIONS BEGIN WEEKS:  
By Arrangement

COURSE OBJECTIVES (in order of importance)  
1. Improve clinical skills in evaluation of patients with respiratory problems by working up and presenting patients with severe lung disease.

STUDENT EXPERIENCES

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

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

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

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

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

TYPICAL WEEKLY SCHEDULE

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<td>Pt. Care Activities</td>
<td>Team Conference</td>
<td>Clinical Conference</td>
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<td>Pt. Care Activities</td>
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ON-CALL SCHEDULE & WEEKEND ACTIVITIES:  None

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