

## **Medicine Rotation**

### **Hours/Locations**

Hours vary, generally 7AM-3PM on non-call days and 7AM-8PM on call days. It is a challenge to keep these hours, so expect generally +/- 2 hours, depending on you and your team's productivity & patient care. First day, meet at 7AM in D building on the 7<sup>th</sup> Floor for orientation. After, your senior resident will show you the floor you will be working on. Sign out is at 7 AM on the 7<sup>th</sup> floor North side, day starts and ends here generally.

### **Attire**

Show up first day in white coat, dress shirt, tie. Scrubs for on call days. Talk with your resident, some are flexible.

### **Responsibilities**

Your team (attending, senior, you, +/- med student) carries 12-20+ patients and you are responsible for providing good quality patient care for these patients during this month. Your direct responsibilities change with your team.

### **Tips/Helpful Stuff**

You all did a medicine rotation, so you have an idea of the flow of the rotation. Your attending and resident will help you with the details, so ask them first, but the following are some extra hints and helpful things to keep in mind.

#### *Basic Day*

- After sign out, print a list "Physician Sign Out Rounding" to keep track of 1) New results/consults, 2) To Do's
- Each day for every patient: ELICON (Examine, Labs, Imaging, Consults, Orders, Notes)
- Keep a list in QuadraMed: The front page of QuadraMed is a list of your patients, keep this current and follow it.
- Use the COW to finish notes in the morning as you round. Try and finish notes by 12. Keep a running word doc.
- In afternoon before 3:30 do consults (1<sup>st</sup>) then discharges, new admissions, meetings w SW and your To Do's.
- Discharge requires: 1) Prescriptions, 2) Discharge Med Rec, 3) Discharge summary, 4) Order to discharge
- At 3:30 sign out the overnight To Do's to the night team. After signing out, review your list and ensure you did ELICON for each patient, order AM labs and add PRN meds prior to finishing up other unfinished tasks.

#### *Hints/Tricks*

- To print sign out → Big House (up right) → KCH tab → Sign out listing report → S → Team Name → Print
- Call med senior (4141) at the beginning of the day to let them know your census & to get admissions overnight.
- Open up old notes w "Report Query" to copy & paste into the Word Doc to copy forward (with changes) old notes.
- On call days, wear scrubs. Code 66: "We don't know what's wrong", Code 88: Respiratory, Code 99: Arrest
- To change a note you wrote → Add'l Functions tab → Delete/Correct note → Click your note → Document.
- Ask your senior or the clerk for anything you are confused about "I'm the new intern, sorry I'm dumb, but..."
- To keep a current list → Assign current patents (Search MRN → Provider Assignment) & unassign old patients
- Flag new by clicking "Sign/Review" on the far right of list. Review events & sign for all patients. Now your current.
- ALOC (alternate level of care) patients need notes every OTHER day. Ask attending to put SW pt's on ALOC.
- After discharge. Put the d/c summary, prescriptions, hole punched & sticking up in chart at clerk. Unofficial sign.
- Orders get dropped when a patient moves location (to MRI, new floor). Expect & be vigilant about renewing.
- Certain meds need an ID consult. IV cipro/zosyn/vanc >3 days. All HAART meds, fluconazole. Put consult in.
- Use your med students. Good ones can carry up to 4-5 patients. Blood draws, ABGs, guaiac rounds, etc
- Social work rounds are at 11AM. Half of your day is trailing social workers around. Stay on this. Keeps #'s down.