

NORTHEAST GEORGIA MEDICAL CENTER

INTERNAL MEDICINE RESIDENCY

25.MICU Senior- PGY-3

Rotation Schedule and Expectations

Welcome to your Critical Care rotation! We are delighted to have you working with us in this challenging yet rewarding educational atmosphere.

A fundamental knowledge of critical care medicine is essential to the practice of every discipline within medicine. The successful internist must achieve competence in the essential skills of stabilizing and intervening in the care of critically ill patients for the first 24 hours until a medical intensive care specialist assumes care. The Northeast Georgia (MICU) rotation will provide residents with a rigorous experience in the assessment and care of the critically ill medical patient. Northeast Georgia provides a unique environment of diverse pathophysiology as well as patients from diverse communities, socioeconomic and cultural backgrounds. Residents will manage patients in a tertiary care ICU setting as part of a multidisciplinary team, under the direct supervision of attendings with expertise in critical care medicine.

Unique to Northeast Georgia Medical Center, we have 2 MICU unique practice environments, Gainesville and Braselton. PGY 1 residents will rotate at the Gainesville Campus MICU only. PGY 2 and PGY 3 residents will have the opportunity for teaching and supervising the intern as well as learning to become proficient in leading daily academic multidisciplinary rounds. The skill to be able to lead a multidisciplinary team with almost with minimal input from senior staff is a skill that the PGY 3 resident must be skilled in upon completion of 7 MICU rotations.

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Faculty

Critical Care	
Provider	Phone
James Bailey, MD	770 714 1558
Olufunsho Bankole, MD	404-551-3556
Dean Karampelas, MD	404-434-4366
Gagan Kumar, MD	414-688-4827
Dhavel Patel, MD	856-278-2798
Erine Raybon-Rojas, MD	404-723-7838
Gordon Turner, MD	404-831-2345

Faculty Rotation Coordinator: ErineRaybon-Rojas, MD

Erine.Raybon-Rojas@nghs.com

Preferred Method of Communication: x Cell Phone Email Text

- Please contact rotation attending via phone for all correspondences. We encourage you to speak directly with use to ensure adequate real- time communication for your needs during this rotation

Name and Location(s) of Your Practice:

Northeast Georgia Medical Center- Medical ICU Gainesville, 734 Spring St NE, Gainesville, GA 30501

Rotation Schedule/Timing:

	Sun day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM Time	OFF	8-12	8-12	8-12	8-12	8-12	7-12
PM Time		1-4	1-4	1-4	1-4	1-4	1-4

Team Structure, Call Schedule, Supervision:

The MICU teaching service is organized as a team - Each team is composed of an intern and a resident at a minimum, but may include additional residents and medical students. Call will be every 6th day (24+4). The intern will be directly supervised by in house attending for the entire call.

The team will work together to provide care, with the resident playing a supervisory role and the intern providing the direct care to the patient and communicating with the family of the patient. An MICU attending provides direct supervision of the residents.

Interns are capped at 5 new patients a day and not more than 8 new patients in 48 hours period.

- **When supervising more than one first- year resident, the supervising resident must not be responsible for the supervision or admission of more than 10 new patients and 4 transfer patients per admitting day or more than 16 new patients in a 48-hour period.**
- **Residents will only provide routine care to the patients of the teaching service**
- **Non-teaching patients are those whom the residents do not routinely provide care for**
- **Internal medicine residents are not allowed to provide routine care for patients that are not on the teaching service**
- **Emergency care covers all patients at all times will be exempt from this policy**
- **All emergency care will be continued until another qualify physician can take over**
- **Work hours limitation and patient admissions/care limit are strictly enforced. Please see your handbook for more information.**
- **Admission from 8am-3:00pm. Patients admitted will remains on team census.**
- **Resident may leave at 4pm if done with work**

Curriculum Review:

The MICU curriculum is reviewed with the residents at the start of each rotation, and residents are offered the opportunity to ask questions.

Rounds: Residents as expected to be present and participate in shift sign out at 7 am in the Intensivist office located in North Patient Tower Medical ICU - C pod. Combined team teaching and management rounds are held daily starting at 8:30 AM. Inclusive in our daily team rounds include attending staff, residents, clinical critical care pharmacists, respiratory therapist, dietician, physical therapy, Case management, and chaplain. Residents must be ready for rounds by 8:30 AM. Pt Rounds start preferentially with new patients and old patients on the post-call resident so that they may complete their duties by 10 AM. Residents are expected to examine and evaluate their patients each morning independently prior to multidisciplinary teaching rounds. They are to be present for daily teaching and management rounds. Residents will briefly discuss each of their patients with the attending each afternoon. The resident will take the last admission at 3:00 pm to ensure all daily work is completed and resident is prepared for sign out. The Resident not on call will provide a comprehensive sign out to on call resident and attending n daily between 4pm using the SBAR model.

Call: Post-call residents are expected to leave the hospital promptly after morning rounds. The on-call resident is expected to assist the post-call team in patient-care duties. In accordance with ACGME requirement, the total duration of on-call shifts shall not exceed 28 hours (24 +4). There are always 10 hours between a regular daily shift and 14 hours between a 24+4 shift and next work day.

Days off and work hours: Each team member will be scheduled 1 day off per week on a non-admitting day. It is the responsibility of the senior resident to coordinate days off within his/her team, with attention to any resident continuity-clinic requirements as well. This schedule ensures compliance with ACGME duty hour mandates (average scheduled hours per week is ~70 hours). In the case that a resident is in danger of exceeding any duty hours limits (80 hours averaged over 4 weeks), it is the resident's responsibility to communicate this to the attending so that accommodations can be made. The MICU is staffed 24 hours a day with an intensivist. Proactive communication and truthfulness in reporting is expected. Management of fatigue and proper rest is crucial to providing safe care to our patients in the MICU. Attention to this detail matters to the attendings, nurses, and above all the patients.

Internal Medicine Mandatory Didactics to Attend:

Morning report: 7:30am -8:30am

Noon Conference: 12pm-1pm Mondays through Thursdays

Grand Rounds: Fridays

Small Group Didactics by MICU attending 3:30-4:00pm Daily

Morning Report: Mandatory 2 per week.

Noon Conference: Mandatory Monday through Thursday plus Grand Rounds on Friday.

Ambulatory Block – Not required for this rotation.

Didactic Discussions with the Attending in the MICU – Required 3 per week in the afternoons. 1 hour each on topics pertinent to MICU care.

SCCM Online modules – Required. Will be assigned by Dr. Rojas for each block based on number of rotations done in the MICU.

Expectations:

1. Residents are expected to contact the Precepting Physician before the 28th calendar day of the month prior to starting the rotation.
2. Residents are to notify Precepting Physician of their clinic days for the month on the 1st day of the rotation.
3. Residents are expected to be on time for their rotation and contact the Precepting Physician if they are going to be late.
4. Curriculum will be read by the Resident and discussed by the Resident with the Attending Physician by the third day of the rotation.
5. On the 1st day of the rotation, the Resident will schedule a meeting with the Attending Physician to be held by the 28th day of the month for an exit-interview.
6. By the 28th of each month, the Resident will have a meeting with the Attending Physician to discuss evaluation and feedback.

Study Time/Scholarly Activity:

While residents are on clinical rotations they are expected to participate in all aspects of patient care (eg. shadowing Preceptors during procedures) and learn through patient care. During any rotation, free moments should be used for self-directed learning, studying, researching the literature, or working on quality improvement projects. Requesting scholarly activity time or study time away from the clinical area would be unacceptable.

Since doctors learn best via patient care, they should be involved in patient care as much as opportunity will allow. Taking time away to study while patient care is happening is not recommended best practice.

Unplanned Absence/Unexpected Medical Emergency:

What steps to take in the event of an unplanned absence/medical emergency.

1st Step: See GMEC policy regarding Time Away from Work. Contact the following individuals in the following order:

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|---|---|
| 1. Residency Program Coordinator | <hr/> (770)219-8734
[Phone Number] |
| 2. Internal Medicine Chief on Call | <hr/> TBD
[Phone Number] |
| 3. Precepting Physician | <hr/> Rotates – Call via Cellphone
[Phone Number] |
| 4. The Office Administrator or the Office Manager | <hr/> See Above
[Phone Number] |