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REPORT TO: Inpatient Tower, PICU 8th floor

PREREQUISITES: Pediatrics Clerkship

DURATION: 4 weeks

DATES OFFERED: June - November
Rotation scheduled: 6/26, 7/24, 9/5, 10/2 and 11/6

NUMBER OF STUDENTS: 1

VISITING STUDENTS: Yes

INSTRUCTION:
50% Supervised Patient Care
20% Attending Rounds/Small group discussion
20% Independent Study – leading to 10-20 minute presentation by the student to the PICU team on a topic of interest
10% Lectures

SUPERVISION:
60% Faculty
40% Chief Resident / Resident

DESCRIPTION:
Under close supervision by the staff and residents of the service, patients are evaluated in the ED, wards and PICU. Experience is gained in diagnosis, treatment and disposition of infants and children with a variety of critical illnesses. Students will be expected to present and discuss patients on rounds daily and perform relevant reviews of the medical literature. The student is also expected to participate in departmental and divisional conferences and seminars. Students will be expected to prepare and present at least one educational conference for the PICU team during the rotation. Students will have a minimum of 1 day off per week.

EVALUATION:
Student will be given the objectives and requirements on the first day of the clerkship. The methods of evaluation are direct observation by faculty and residents/chief residents. Feedback is given to students on a regular basis as they are observed with patients. Write ups are reviewed and presentations are critiqued. The student will be asked to take an end of rotation multiple-choice examination. Students will receive immediate feedback on exam results. The exam is designed for residents, and is therefore optional for the student. The student’s score on the exam will not be factored into the final grade for the rotation.

COURSE OBJECTIVES:
Students will be able to:
1. Perform a history and physical examination appropriate for the critically ill child.
2. Demonstrate, by their interaction with acutely ill children and their families, the ability to communicate effectively aiding in data collection and patient evaluation.
3. Demonstrate knowledge of basic principles of pathophysiology.
4. Perform an initial work up and formulate a differential diagnosis and management plan for a patient who presents with respiratory distress, sepsis, altered mental status, or convulsions.
5. Describe the pathophysiology, and initiate management for a patient with alterations in vital organ function, focusing in particular on the cardiorespiratory system and its role in multi-organ homeostasis

Daily Schedule:
M, W, F 7:00-8:00 or 8:30 a.m. Resident Work Rounds
T, Th 8:00-9:00 a.m. Grand or Problem Rounds
8:30 or 9:00 a.m.-11:30 a.m. Attending rounds
M, T, W Noon-1:00p.m. Pediatric Teaching Conference (during lunch)
1:00-5:00 p.m. Patient care, special educational sessions
5:00 p.m. Chief resident sign out rounds

Call Schedule: 5 days of overnight shifts from 6:00 PM – 8:00 AM per 4 week rotation

*Selective Attendance and Illness Policy
In order to insure adequate clinical exposure, no more than 3 days of excused absences (to include official Holidays) can be accepted during a selective. This policy does not imply that absences are guaranteed; absences may be excused at the discretion of the faculty. Absence due to illness must be reported to the faculty or his/her designee as soon as possible. In case of extended absence (2 days or more), a note from a physician (who is not a relative) is required and the absence will be reported to the Office of Student Affairs. A physician note may be requested for any absence, at the discretion of the faculty.
Students will generally be required to make up days before a passing grade can be assigned. All absences must be excused and any planned absence must be registered with the preceptor prior to the first day of the selective. Students should take vacation time if he/she anticipates a need for more than 3 absences during a selective. USMLE and BLS/ACLS will not be considered excused absences.