UCSF
Department of Medicine

Residency Programs
Electives Brochure
2008-2009
MEMORANDUM

TO: Medicine Residents

FROM: Drs. Julian, Kaplan, Williams and Cornett

DATE: April 14, 2008

RE: Elective Brochure

CC: Program Directors, Chief Residents

Attached please find the elective brochure that will serve as your guide when selecting electives. If you need additional information about a particular elective, please contact the director or administrator listed for that elective. In addition, on the web is a copy of the Research and Non-Standard Clinical Electives policy that spells out the steps to take if you are planning a research or any non-standard elective next year (e.g., months away for research or clinical work, any elective that is not included in the brochure).

There are a few key features in the elective brochure that you should pay particular attention to:

• **Key Half Days**: Most of the directors have chosen key half-days for their electives. These are the half-days that are important to the educational quality of the elective, and usually include important conferences or clinical experiences. These key half-days are listed above the schedule, and are double-bordered within the schedule. If you enroll in an elective with identified key half-days, please discuss any conflicts with the elective director (ex: if they conflict with your continuity clinic).

• **Jeopardy and Vacation Requirements**: Some electives have special requirements regarding jeopardy and vacation. These requirements are listed below the sample schedule for each elective, and include the maximum amount of vacation (if any) that a resident may take during that elective. When the final grids are distributed, each elective director will be notified of the residents assigned to their rotation, along with jeopardy and vacation information, if applicable. From that point on, it will be your responsibility to notify the elective directors (or administrators, if one is listed) regarding vacation or jeopardy responsibility changes. Three months advance notice of vacation changes is required.

• **Educational Objectives**: Most of the elective directors have developed educational objectives for their elective. These are to help you better choose those rotations that meet your individual learning goals. We hope this brochure is helpful. If you have suggestions about additional information that would be useful in future years, please let us know (ntran@medicine.ucsf.edu). If you have any questions about the Research and Non-Standard Clinical Electives policy, please contact us or your program director. Good luck in your planning for next year! Thank you.
### Allergy & Immunology (Moffitt-Long)

**Maximum # of Residents per month:** 1  
**KEY HALF-DAYS:** Mon. PM / Tues. PM / Wed. AM, Thurs. AM & PM

**Dr. Katherine Gundling**  
353-2725 tel; 353-2568 fax; Box 0359  
Katherine.gundling@ucsf.edu  
Location: ACC 5th Floor  
Administrator: Patrick Manalastas 476-6926 tel, 415-476-5712 fax; Patrick.Manalastas@ucsf.edu

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<th>Tuesday</th>
<th>Wednesday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Journal Club 8:10AM</td>
<td>Pulm Conf 8-9AM</td>
<td>Clinic 9AM-12PM</td>
<td>Pulm Physiol Conf 8-9:30AM</td>
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<td>Ped. Allergy Clinic 9AM-12PM</td>
<td>Skin test 9AM-12PM</td>
<td>Skin test 9AM-12PM</td>
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<tr>
<td></td>
<td>Skin Test 9AM-12PM</td>
<td>Clinic 1st, 3rd</td>
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<tr>
<td>PM</td>
<td>Clinic 1-5PM</td>
<td>Clinic 1-5PM</td>
<td>Fellows Core Curr. 1-2PM</td>
<td>Clinic 1-5PM</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours.  
**JEOPARDY:** OK  
**VACATION:** Up to 1 week OK. If necessary, can accommodate up to 2 weeks.

**DESCRIPTION:** This rotation takes place in the outpatient setting and consists of seven half-day clinics per week: allergy & immunology clinics (7 half-days), and allergy skin testing (2 half-days). Teaching conferences include a journal club, an A/I conference, fellows’ core curriculum, pulmonary grand rounds, pulmonary physiology course and weekly case discussion with fellows. There is no call for this rotation.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:  
- Perform a detailed allergy/immunology history and physical examination.  
- Understand the indications and interpretation of diagnostic and therapeutic procedures including allergy skin testing, allergen immunotherapy, acute drug desensitization, spirometry and nasopharyngoscopy.  
- Understand the pathophysiology diagnosis and treatment of common allergy/immunology disorders including allergic rhinitis, asthma, sinusitis, urticaria/angioedema, anaphylaxis, chronic cough, food hypersensitivity, drug reactions, latex allergy.  
- Understand and implement peak flow monitoring and environmental control measures.  
- Understand the clinical evaluation and laboratory testing of adult primary immune deficiency.

### Cardiology – Consultative (Moffitt-Long)

**Maximum # of residents per month:** 1  
**KEY HALF-DAYS:** Thurs. PM

**Dr. Michael Crawford**  
502-8584 tel, 502-8943 fax Box; 0124  
crawfordm@medicine.ucsf.edu  
Administrator: Norisa Berardi  
502-1115 tel; 502-8627 fax, Box 0124  
Norisa.berardi@ucsf.edu

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<tbody>
<tr>
<td>AM</td>
<td>Work rounds</td>
<td>Work rounds</td>
<td>Work rounds</td>
<td>Work rounds</td>
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<tr>
<td>PM</td>
<td>Teaching rounds</td>
<td>Teaching rounds</td>
<td>Teaching rounds</td>
<td>Teaching rounds</td>
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Shaded areas represent required work hours.  
**JEOPARDY:** OK  
**VACATION:** Up to 1 week OK.

**DESCRIPTION:** This elective is designed to provide residents with comprehensive exposure to consultative cardiology. Residents are responsible (with assigned Cardiology fellow) for the initial evaluation of inpatients whose physician has requested a cardiology consultation. Every afternoon, residents round with the entire consult team on all consult service patients. A wide variety of cases are seen by the Cardiology Consult Service, including pre- and post-operative patients with CV diseases, patients with a variety of cardiac dysrhythmias, patients with heart failure, CAD, cardiomyopathy, endocarditis and congenital heart disease. Residents can also participate in electrophysiology rounds three times per week, weekly ECG reading with ECG attending, outpatient experiences with the consult service attending or in the arrhythmia clinic, daily review of relevant noninvasive studies of consult service patients, and a variety of conferences in the Division of Cardiology. There is no call for this elective.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:  
- Assess the preoperative risk of cardiac patient undergoing non-cardiac surgery, and recommend specific procedures.  
- Assess and treat post-operative cardiac arrhythmias.  
- Have a good understanding of the role of non-invasive and invasive cardiac studies as they apply to a broad range of hospitalized patients, and recommend appropriate diagnostic and therapeutic interventions.
Cardiology – Outpatient (3-Hospital)
Currently not being offered. A similar experience may be possible as a designer elective arranged with the help of a cardiology faculty member. Refer to the schedule of clinics/conferences below.

Note – schedule below is intended to display just some of the opportunities that are available. This schedule is subject to change; additional experiences can be arranged.

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<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>8-12 VA cath or Moffitt EP/cath labs</td>
<td>7:30 VA Echo research mtg (Schiller)</td>
<td>7:30 VA echo conf (Schiller)</td>
<td>9 VA molecular cardiology mtg (Simpson/Jensen)</td>
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<tr>
<td></td>
<td>9-12 SFGH clinic Cheiltin* (contact Claudia 206-6913)</td>
<td>8-9 ECG’s Moffitt fellow’s rm, 11th Fl.</td>
<td>7:30 SFVA echo conf w/Schiller</td>
<td>SFGH Beginner Echo teaching with Bianka Emison*</td>
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<tr>
<td></td>
<td></td>
<td>9-12 Moffitt Stress tests Anne Thorson (353-8866)</td>
<td>9-12 VA CHF clinic (Teerlink/Massie)</td>
<td>9-12 Moffitt Chatterjee clinic 350 parnassus 2nd Fl*</td>
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<tr>
<td></td>
<td></td>
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<td>9-12 VA EP/Device clinic (Keung)</td>
<td>9-12 SFGH Mary Gray clinic*</td>
</tr>
<tr>
<td>PM</td>
<td>1:5 VA cath/Moffitt EP/cath lab</td>
<td>3:30 SFGH cath conf</td>
<td>12p VA cath conf</td>
<td>1-5 Vascular Clinic VA McNulty</td>
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<td>3:30 SFGH cath conf</td>
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<td>3-5 Moffitt nuclear reading</td>
<td>(every other week in surgery module)</td>
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<td>4:30 Moffitt cardiology grand rounds</td>
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<td>3-5 VA echo (Goldman)</td>
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Shaded areas represent required work hours. Note – schedule is intended to display just some of the opportunities & subject to change; additional experiences can be arranged. * = contact to confirm beforehand

Clinical Pharmacology / Acute Poisoning (SFGH)

Maximum # of Residents per month: 1

Key Half-Days: Tues AM (our weekly grand Rounds and student presentations)

Shaded areas represent required work hours.

Jeopardy: OK  Vacation: Up to 1 week OK.

Can this elective be structured by half-day? Yes, if the resident can be here mornings, any of the afternoons can be away at other duties.

Description: Residents in an interdisciplinary setting learn to assess clinical problems relating to the toxic effects of drugs and poisons. Residents participate in case discussions of actual and mock poisonings and drugs overdoses, and perform follow-up
UCSF Medicine Residency Program Electives Listing
telephone calls on hospitalized poisoned patients, and see some poisoned patients who have been admitted at SFGH. The Clinical Toxicology Service is a function of the San Francisco Division of the California Poison Control System.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Describe the indications, advantages, and disadvantages of various gut decontamination measures, including syrup of ipecac, gastric lavage, activated charcoal, and whole bowel irrigation.
• Describe the clinical presentation and treatment of poisoning caused by a variety of agents.
• Describe various methods for enhanced elimination of poisons, including alkaline diuresis, hemodialysis, hemoperfusion, and repeated dose charcoal.
• Discuss the initial approach to differential diagnosis and management of coma, seizures, hypotension, and other complications of poisoning.
• Discuss the uses and adverse effects of a variety of antidotes.
• Construct a treatment plan for various toxic exposures.

Endocrine/Metabolism (3-Hospital)
Maximum # of Residents per month: No Limit

KEY HALF-DAYS: Tues (general endocrine) Wed (diabetes) and Thurs (thyroid) afternoons at Parnassus, Thurs morning (general endocrine and diabetes) at SFGH. Friday morning (general endocrine and diabetes) at VAMC

Schedules vary. Sample:

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<tbody>
<tr>
<td>AM</td>
<td>Diabetes UCSF</td>
<td>Lipids SFGH</td>
<td>Educational</td>
<td>General Endo</td>
</tr>
<tr>
<td>PM</td>
<td>General Endo</td>
<td></td>
<td></td>
<td>SFGH Thyroid</td>
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<td></td>
<td>UCSF</td>
<td></td>
<td></td>
<td>Clinic UCSF</td>
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Shaded areas represent required work hours.
JEOPARDY: OK VACATION: Up to 1 week OK.

DESCRIPTION: This elective takes place in the various clinics. Endocrine faculty precept the Resident. Each clinic is followed by a post-clinic conference.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Understand pathophysiology and management of common endocrine disorders.
• Understand management of Type I and 2 diabetes.
• Understand bases of endocrine testing.

Gastroenterology (Moffitt)
Maximum # of Residents per month: 1
KEY HALF-DAYS: Tues. PM/Weds AM/Fri. AM

Typical Schedule (can be tailored)

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<th>Monday</th>
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<tbody>
<tr>
<td>AM</td>
<td>Consult Rounds</td>
<td>Consult Rounds</td>
<td>GI Grand Rounds</td>
<td>Consult Rounds</td>
</tr>
<tr>
<td>PM</td>
<td>Txplant Conf.</td>
<td>Liver Clinic &amp;</td>
<td>Procedures/Research</td>
<td>MZ Clinic (IBD)</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours.
JEOPARDY: OK VACATION: Up to 1 week OK.

DESCRIPTION: This rotation consists of two half-days of clinic (Liver and GI) and associated diagnostic or therapeutic procedures; flexible sigmoidoscopy can be learned and performed. The resident joins the inpatient GI consult service, taking consults along with two GI fellows, rounding with the team and presenting cases. Conferences include weekly GI Grand Rounds and Seminar Series (both
**Gastroenterology (SFGH)**  
*Maximum # of Residents per month: 2*

**KEY HALF-DAYS:** Mon. PM – Liver Clinic/Thurs. PM – General GI Clinic

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<tbody>
<tr>
<td>AM</td>
<td>Procedures</td>
<td>Procedures</td>
<td>Lectures @ UCSF</td>
<td>Procedures</td>
</tr>
<tr>
<td>PM</td>
<td>Liver Clinic</td>
<td>Procedures</td>
<td>Follow-up Clinic</td>
<td>GI Clinic</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours.

**JEOPARDY:** OK  
**VACATION:** Up to 1 week OK.

**DESCRIPTION:** This rotation consists of in-patient and out-patient consultations on patients with GI, liver, pancreatic and/or peritoneal diseases. All new patients are presented twice daily on formal rounds combining validation of physical findings, review of imaging and discussions of therapy and pathophysiology. Weekly Pathology, Medical-Surgical and Radiology conferences are held highlighting interesting findings from the past week. Weekly GI Journal Club and GI Grand Rounds are also held at Moffitt-Long Hospital.

**OVERALL STRUCTURE OF ELECTIVE BY HALF – DAY:**
- **Monday:** AM – Rounds/procedures PM – Liver Clinic  
  Tuesday: AM – Rounds/procedures PM – Pathology slide review  
  Wednesday: AM – Grand Rounds – UCSF PM – Follow up GI Clinic, Radiology  
  Thursday: AM – Rounds/procedures, Medical-Surgical Conference PM – GI Clinic  
  Friday: AM – Rounds/procedures PM – Procedures/rounds/final case review

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:
- **Conduct of pointed history and physical examination of patients with GI disorders**
- **Learn to recognize common Pathological features including: adenomas, carcinomas, etc.**
- **Understand the utility and diagnostic yields of endoscopic procedures.**
- **Recognize the principal findings of abdominal US, CT and MRI in patients with GI disorders.**

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**Geriatrics (VAMC)**  
*Not offered May, July, August, December, January*

**KEY HALF-DAYS:** Mon. AM/Mon. PM/Wed. AM

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<tbody>
<tr>
<td>AM</td>
<td>Core Curriculum</td>
<td>Palliative Care &amp;</td>
<td>Grand Rounds and</td>
<td>Lakeside Clinic</td>
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<tr>
<td></td>
<td>Screening Conf.</td>
<td>Geriatrics Consults</td>
<td>WIP</td>
<td>(Ocean Ave.)</td>
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<tr>
<td>PM</td>
<td>Pre-Clinic Conf.</td>
<td>Palliative Care &amp;</td>
<td>Palliative Care</td>
<td>Directed reading</td>
</tr>
<tr>
<td></td>
<td>Geriatric Clinic</td>
<td>Geriatrics Consults</td>
<td>and Geriatrics</td>
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<tr>
<td></td>
<td>@ VA</td>
<td>Consults.</td>
<td>Consults.</td>
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Shaded areas represent required work hours. Schedules will be individualized based on resident interests.

**JEOPARDY:** OK  
**VACATION:** OK, works well as 2-week rotation.

**DESCRIPTION:** This elective gives the residents exposure to geriatric care in a variety of settings, including ambulatory care (VA and Lakeside Clinic), home care (VA), nursing home (VA and/or Jewish Home for the Aged), and inpatient consultations (VA). The schedule is flexible, and interested residents are encouraged to speak with us 1-2 months in advance so that we can tailor the elective to the interests and needs of the resident. Residents also have the option of taking the “palliative care” tract of this elective, which allows them 2-4 weeks of in-depth management of patients in the VA nursing home palliative care unit.

**EDUCATIONAL OBJECTIVES:** At the conclusion of this rotation, the resident will be able to:
• Administer and interpret common geriatric assessment instruments, including the MMSE, The Geriatric Depression Scale, the Tinetti Gait and Balance Scale, and the clock draw test.
• Perform an outpatient geriatric functional assessment screen and an inpatient geriatric consultation.
• Describe four specific ways that a patient evaluation should be modified for an elderly patient.
• Discuss at least four geriatric syndromes (i.e., dementia, delirium, falls, immobility, incontinence, polypharmacy).
• Work in interdisciplinary teams to provide care for patients, including having an understanding of the roles of various team members.

For residents electing to make palliative care part of the rotation, the following additional objectives will be added. At the conclusion of this rotation, the resident will be able to:
• Assess and establish goals of care for patients near the end of their lives.
• Assess and manage pain and non-pain symptoms for patients at the end of life.
• Communicate bad news to patients and families with compassion and understanding.
• Be able to work effectively on an interdisciplinary team in providing end of life care (including nursing, nutrition, social work, chaplain, psychology, recreation therapy, and others).

Global Health Elective-Uganda

Maximum # of residents per month: 2

(R2s/R3s only)

Dr. Madhavi Dandu
Pager 719-7507,
415-353-9336 tel; 502-1976 fax; Box 0119
dandum@medicine.ucsf.edu
Administrator: Joni Anderson
476-3373 tel, 502-1976 fax; Box 0119
JAnderson@medicine.ucsf.edu

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<th>Monday</th>
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<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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<tbody>
<tr>
<td>AM</td>
<td>ReachOut clinic- HIV care</td>
<td>8:15-9:30AM Morning Report</td>
<td>Home visits with ReachOut clinic</td>
<td>Journal Club at Mulago Hospital</td>
<td>8AM Cards Conf 9AM HIV Clinic Mulago</td>
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<td></td>
<td>Gen Med. Clinic at Mulago</td>
<td>Gen Med Clinic Chest Clinic</td>
<td></td>
<td>Cardiology Clinic</td>
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<tr>
<td>PM</td>
<td>Same as above</td>
<td>Grand Rounds 2PM Mulago</td>
<td>2PM Physical exam rounds Mulago</td>
<td>Cardiology Clinic</td>
<td>2PM Post Mortem Rounds</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours.

JEOPARDY: NO VACATION: minimum rotation 4 weeks.
Language requirements: none
DESCRIPTION: Residents rotate in Uganda in clinical sites.
EDUCATIONAL OBJECTIVES:
• Gain clinical experience in the delivery of health care in a developing country.
• Increase awareness of the complicated barriers to health care in a resource poor environment.
• Enhance cultural sensitivity and a global health perspective.
• Refine history and physical exam skills in a technologically poor environment.
• Explore international health as a potential career interest.
• Develop mentoring relationships with UCSF faculty interested in international health.

Global Health Elective-China & Saipan

Maximum # of residents per month: 1

(R2s/R3s only)

Dr. Madhavi Dandu
415-353-9336 tel; 502-1976 fax; Box 0119
dandum@medicine.ucsf.edu
Administrator: Joni Anderson
476-3373 tel, 502-1976 fax; Box 0119
JAnderson@medicine.ucsf.edu

<table>
<thead>
<tr>
<th></th>
<th>First 2 Weeks</th>
<th>Second 2 Weeks</th>
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<tr>
<td></td>
<td>Inpatient rotation on general medicine service-assigned to ward team, call q 4, some weekend work.</td>
<td>Inpatient rotation on subspecialty service-choose from heme/onc, rheum, pulm, cards, endocrine, renal, gi. Call q4, some weekend work.</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours. Please note this is a sample schedule. Clinical sites/rotations will vary based on resident preference and availability.

JEOPARDY: NO VACATION: minimum rotation 4 weeks.
Language requirements: none
DESCRIPTION: Residents rotate in Beijing and or Saipan in clinical sites.
EDUCATIONAL OBJECTIVES:
• Gain clinical experience in the delivery of health care in a developing country.
• Enhance cultural sensitivity and a global health perspective.
• Refine history and physical exam skills.
• Explore international health as a potential career interest.
• Develop mentoring relationships with UCSF faculty interested in international health.

Hematology (Moffitt-Long)
Maximum # of Residents per month: 2

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<tr>
<th>Monday AM</th>
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<th>Thursday AM</th>
<th>Friday AM</th>
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<th>Monday PM</th>
<th>Tuesday PM</th>
<th>Wednesday PM</th>
<th>Thursday PM</th>
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<tbody>
<tr>
<td>Consultations</td>
<td>Consultations</td>
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<td>Consultations</td>
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Shaded areas represent required work hours. Residents may choose 2 half-day clinics from those listed above.

JEOPARDY: OK VACATION: Up to 1 week OK.

DESCRIPTION: This rotation consists of inpatient consultation and conferences. Conferences include a weekly clinical conference and journal club. Clinical laboratory medicine conferences are available as well. Residents see inpatient consults in Moffitt-Long Hospitals. They are expected to review the blood smears and bone marrow biopsies on all patients that they follow. Morphology sign-out rounds are conducted daily in laboratory medicine, and residents are encouraged to attend. There is an opportunity to attend the outpatient clinics in either malignant hematology or hemostasis & thrombosis, space providing. There is no call for this rotation.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Describe the pathophysiology, diagnosis, natural history, and complications of a range of hematologic diseases, including: DIC, thrombocytopenia, anemia, hypercoagulable disorders, myelodysplastic syndromes, bleeding disorders, chronic leukemias, and basic blood banking procedures/problems.
• Function effectively as a consultant with the ability to generate a differential diagnosis and recommend an evaluation plan and formulate treatment strategies.
• Review a peripheral blood smear and generate a differential diagnosis and recommend an evaluation plan and formulate treatment strategies. Recognize the normal hematologic elements of a bone marrow aspirate smear and clot and generate a differential diagnosis based on the abnormal morphology noted.

Hematology (SFGH)
Maximum # of residents per month: 1
KEY HALF-DAYS: Mon. AM / Wed. PM / Thurs. AM / Fri. AM

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<tbody>
<tr>
<td>AM</td>
<td>Heme/Onc Conf 9:30-12N Sickle Cell Clinic</td>
<td>Consults</td>
<td>Consults</td>
<td>Heme/Onc Journal Club</td>
</tr>
<tr>
<td>PM</td>
<td>Consults</td>
<td>Consults</td>
<td>Hematology Clin SFGH</td>
<td>Consults 2PM Heme-Path Conf.</td>
</tr>
</tbody>
</table>

Shaded areas represent required work hours.

JEOPARDY: OK VACATION: Up to 1 week OK.

DESCRIPTION: Residents rotate on the inpatient consult service as well as attending Wednesday afternoon Hematology clinic. The consult service has an attending, two fellows, as well as occasional outside residents and UCSF students. Residents can expect to see a wide variety of hematologic problems, both benign and malignant. There is a significant exposure to sickle cell disease and other hemoglobinopathies both as urgent inpatient issues and chronic outpatient management. Disorders of coagulation seen on this service. Hematology clinic also provides the opportunity to learn to evaluate and manage both common and unusual causes of anemia. Residents will have the opportunity to evaluate blood smears and bone marrows and learn how to perform bone marrow aspirations and biopsies. Required conferences are: Monday 8am Heme-Onc held Thursdays at 1pm in conjunction with Lab Medicine.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
Hematology- Medical Oncology (Moffitt –Long)  

Maximum # per month:  1

KEY HALF DAYS: N/A

CAN THIS ELECTIVE BE STRUCTURED BY HALF DAY?  
No

Dr. Emily Bergsland  
353-7139 tel; 353-9959 fax; Box 1705  
emilyb@medicine.ucsf.edu

Administrator:  
Kelli Copeland  
kcopeland@medicine.ucsf.edu  
514-0269 tel; 476-0624 fax

DESCRIPTION OF ELECTIVE: Residents evaluate patients on the wards in Moffitt-Long Hospital and participate in daily attending rounds, conferences and seminars. They write notes of initial consultation and daily progress notes. This elective emphasizes patients with blood coagulation disorders, anemia, hematologic malignancies, and solid organ cancers.

LEARNING OBJECTIVES:
1. To learn the pathophysiology, diagnosis, natural history, and complications of a wide range of hematologic diseases including but not limited to the following: leukemia, lymphoma, bleeding disorders, clotting disorders, anemias, thrombocytopenias, and bone marrow failure symptoms.
2. To learn the pathophysiology, diagnosis, natural history, and complications of cancer, including but not limited to the following: breast cancer, gastrointestinal malignancies, lung cancer, genitourinary malignancies, sarcomas, brain cancer, and neuroendocrine tumors.
3. To learn how to review a peripheral blood smear and to recognize the normal hematologic elements of a bone marrow aspirate smear and clot and (if applicable) generate a differential diagnosis based on the abnormal morphology noted.
4. To learn the basic elements of oncologic supportive care, including pain control and management of cancer – or treatment – related complications (e.g. cytopenias, febrile neutropenia, hypercalcemia, cord compression, and tumore lysis syndrome)
5. To develop a basic understanding of the treatment modalities used to treat hematopoietic malignancies and solid tumors (including chemotherapy, radiation, surgery and biologically-based therapies)

IS JEOPARDY ALLOWED: Yes

Number of Weeks of Vacation Allowed During Rotation: 1
Will the Elective Accept Interns: Yes

Overall Structure of Elective, by Half-Day: Consults AM/PM, Attending Rounds PM, Clinical Conference Mon at 8AM, Journal Club Fri at 8AM, Optional Fellows Didactics Mon, Wed, Fri at 7:15AM.

Hematology/Oncology (VAMC)  

Maximum # per month:  1

(Jan->June or possibly July –Dec after discussion)

Dr. Emily Bergsland  
353-7139 tel; 353-7150 fax; Box 1705  
emilyb@medicine.ucsf.edu

Administrator:  
885-7276; Box 1770

Monday | Tuesday | Wednesday | Thursday | Friday
**UCSF Medicine Residency Program Electives Listing**

<table>
<thead>
<tr>
<th>AM</th>
<th>UCSD Clinic Conf 8-9 AM</th>
<th>7:30-8:30 AM Tumor Board 8:30 AM Clin Conf 9-12N Clinic</th>
<th>8:30 AM Clin Conf 9-12N Clinic</th>
<th>8:30 AM Clin Conf 9-12N Clinic</th>
<th>8-9 AM Journal Clinical Club UCSF 9-12N Clinic</th>
</tr>
</thead>
<tbody>
<tr>
<td>PM</td>
<td>1:30-2:30 Morphology Rounds</td>
<td>2-3 PM Social Service/Nursing Review Rounds</td>
<td>1:30-2:30 PM Chest Multidisciplinary Conf</td>
<td>2:30-3:00 PM Pathology Review</td>
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</tr>
</tbody>
</table>

**JEOPARDY:** OK  
**VACATION:** 1 week OK (if no jeopardy or 2 month block)

**DESCRIPTION:** This elective includes inpatient consultations, outpatient clinics and conferences. It is designed to provide the resident with exposure to "real world" hematology/oncology. The resident will be responsible (working with the assigned fellow) for the initial evaluation of inpatients whose physician has requested a consultation; this may include a wide variety of both benign and malignant hematology and general oncology cases. There will be rounds on the inpatients with the fellow and attending on a daily basis; these rounds may include review of pertinent peripheral smears and/or anatomic pathology slides. The resident will participate in some of the outpatient clinics. In either or both of these venues, the resident will have the opportunity to perform needed bone marrow aspirations and biopsies, the resident may participate in obtaining consent and writing the chemotherapy orders and the resident is likely to have the opportunity to enhance his/her appreciation for establishing and managing end of life care. The conferences (also attended by the fellow and attending) include a clinical conference and journal club at UCSF, clinic conferences prior to the start of each morning clinic, morphology rounds (bone marrows of the previous week, interesting peripheral smears and unknown slides are reviewed), a general tumor board, a chest multidisciplinary conference, and an anatomic pathology conference. There is no overnight call for this elective.

**EDUCATIONAL OBJECTIVES:** At the conclusion of this elective, the resident should have developed:

- An appreciation for the outpatient management of the most common malignancies.
- An understanding of the evaluation of common hematologic problems.
- Skill for minimal competence in posterior iliac bone marrow aspiration and biopsy.
- An increased knowledge of the principles and practice of chemotherapy.
- The ability to review a peripheral smear and to recognize the normal bone marrow elements.
- Some competence as a consultant able to formulate a differential diagnosis and recommend an evaluation and treatment strategy.

**HIV Outpatient (UCSF/SFGH)**

*Maximum # of Residents per month: 1*

In December, only a 2-week rotation is available.

No residents December 15-31st

**KEY HALF-DAYS:** Tues, Weds, & Thurs AM/ Mon thru Thurs PM

Will the elective accept interns: Yes

**SFGH Chief Medical Residents**

206-8322 tel

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<tbody>
<tr>
<td>AM</td>
<td>Academic Time</td>
<td>CPMC Clinic (Rick Loftus) 8:00-12:00</td>
<td>HIV Grand Rounds, Carr Auditorium 8:00-9:00</td>
<td>Men of Color Clinic, PHP (Malcolm John) 8:30-12:00</td>
</tr>
<tr>
<td>PM</td>
<td>PHP Clinic (Coffey/Machttinger) 1:00-5:00</td>
<td>CPMC Clinic (Rick Loftus) 12:30-5:00</td>
<td>East Bay AIDS Center (Steve O'Brien) 1:15-5:00</td>
<td>CPMC Clinic (Rick Loftus) 12:30-5:00</td>
</tr>
</tbody>
</table>

*This sample grid is not including continuity clinics.*

**JEOPARDY:** OK  
**VACATION:** Up to 2 weeks OK (works as well as 2-week rotation).

**DESCRIPTION:** This rotation will provide house officers with the opportunity to broaden their understanding of the complex issues and diseases affecting patients infected with HIV in the outpatient setting. This elective will allow the resident to interact with attendings that specialize in the care of HIV-infected patients, both in a traditional academic setting and in community-based clinics. There is an emphasis on learning and teaching. Your primary resource for this rotation will be your attendings and the HIV InSite Knowledge Base which can be found at http://hivinsite.ucsf.edu/InSite?page=KB. Lectures will be arranged between the preceptor and the residents,
The residents will also be expected to attend HIV Grand Rounds, which will be held on Wednesday mornings at 8am in Carr Auditorium on the SFGH campus.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Perform a thorough history and physical exam of a patient living with HIV or AIDS that emphasizes pertinent positives and negatives and demonstrates superior knowledge of common problems in this population.
• Describe the epidemiology, presenting symptoms, diagnostic evaluation, general prognosis, and treatment options for common AIDS related outpatient problems.
• Be able to initiate antiretroviral therapy (chemotherapy) for the antiretroviral naïve patient. Become aware of the appropriate resources for referring a patient for salvage chemotherapy.
• Understand the dynamic concepts of antiretroviral resistance.
• Develop an understanding of psychosocial and psychiatric issues that are relevant to people living with HIV and AIDS and learn appropriate sources for information and referral.
• Describe the common HIV-associated central nervous system, pulmonary, gastrointestinal, and neoplastic complications and their diagnosis and treatment.

HIV/AIDS Consult (SFGH)

Maximum # of Residents per month: 1

KEY HALF-DAYS: Wed AM
Will the elective accept interns: Yes

Availability for this elective may be limited; pre-approval required from the course director prior to enrollment. Residents will rotate on the HIV/AIDS inpatient consult service at SFGH.

Infectious Diseases (Moffitt-Long)

Maximum # of Residents per month: 2

KEY HALF-DAYS: Tuesday AM – Tri-Hospital conference + didactic session after

Availability for this elective may be limited; pre-approval required from the course director prior to enrollment. Residents will rotate on the Infectious Diseases consult service on a half-day basis.

Can this elective be structured by half-day? No, but we can accommodate half-days away. We do it for fellows who have their clinics on Tuesday and Thursday afternoons.

DESCRIPTION: Almost exclusively an inpatient consultative service with about 20 consults per week; no weekend or night call for residents; daily (weekdays) attending rounds, weekly microbiology rounds. There is the option of rotating on either the general ID consult service, or the new ID Transplant service, which handles infectious disease issues in transplant and immunosuppressed patients.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Diagnosis and therapy of common inpatient infectious diseases.
• An understanding of antimicrobial spectrum and appropriate use.
• Understanding appropriate use and interpretation of diagnostic tests.
**Infectious Diseases (SFGH)**

*Maximum # of Residents per month: 2*

KEY HALF-DAYS: Tues. AM / Fellow Clinic Day

Dr. Henry “Chip” Chambers  
206-5437 tel, 443-8978 pager  
[**hchambers@medsfgh.ucsf.edu**](mailto:hchambers@medsfgh.ucsf.edu)  
Administrator: Aida Maluto  
206-8189 tel; Box 0868  
[**amaluto@medsfgh.ucsf.edu**](mailto:amaluto@medsfgh.ucsf.edu)

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<tbody>
<tr>
<td><strong>A M</strong></td>
<td>Consults</td>
<td>Tri-Hospital ID Grand Rounds at UC Consults</td>
<td>PHP/AIDS Grand Rounds at SFGH Consults</td>
<td>Consults</td>
<td>Microbiology rounds</td>
<td>Consults</td>
<td>Occasional weekend coverage required.</td>
</tr>
<tr>
<td><strong>P M</strong></td>
<td>Consult rounds</td>
<td>Consult rounds ID Fellow in Clinic*</td>
<td>Consult rounds M &amp; M</td>
<td>Consult rounds</td>
<td>ID Fellow in Clinic*</td>
<td>SFGH case conference once a month</td>
<td>Consult rounds</td>
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</tbody>
</table>

Shaded areas represent required work hours. Weekend responsibilities include 1-2 weekends of coverage with ID attending – great learning experience and a lot of fun. Takes about 2-4 hours 1-2 days for the weekend.

* Fellows attend a clinic at the VA on Tuesday or Thursday afternoon from 1:00 pm to 5:30pm

**JEOPARDY:** OK  
**VACATION:** Up to 1 week OK.

**DESCRIPTION:** This rotation takes place on the ID consult service. Residents will be responsible for initial consultation and follow-up of patients as assigned by the ID fellow. Residents will also provide back-up to the fellow and be responsible for covering the service one or two weekends a month. Usually this involves rounding on one weekend day only and otherwise being available by pager. Residents attend 1-2 conferences per week and various ID rounds. The resident will give one presentation at a Thursday conference. The ID service works closely with the microbiology department, which also offers teaching sessions and the opportunity to review interesting clinical specimens.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective the resident will be able to:

- Recognize the presence of infection in outpatient and hospitalized patients, including geriatric populations and immunocompromised hosts.
- Perform a complete infectious disease consultative history and physical.
- Construct a differential diagnosis and design a diagnostic evaluation in patients with infections.
- Understand the natural history of infection, how it is altered by therapy, and how to monitor response to therapy.
- Interpret and apply results of clinical microbiology tests to diagnosis and treatment of infectious diseases.
- Gain knowledge of pharmacokinetics, mechanisms of action, basis of resistance for antimicrobial agents as well as drug costs, interactions, and strategies for optimizing patient adherence.
- Manage antibiotics, including through the administration of antimicrobial and biological products via all routes and through the proper selection of agents so as to maximize therapeutic efficacy, minimize costs, and mitigate the emergence of antimicrobial resistance.
Interdisciplinary Care of Homeless and Marginally Housed Populations

Maximum # of residents per month: 1

Dr. Sharad Jain and Dr. Joseph Pace
sharad.jain@ucsf.edu; 206-4987
Joseph.Pace@sfdph.org; 353-5093

KEY HALF-DAYS: Will be based on resident’s continuity clinic schedule.

TENTATIVE SCHEDULE (to be determined with resident prior to rotation):

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<tr>
<td>AM</td>
<td>Cont clinic</td>
<td>Academic time</td>
<td>HUH Clinic</td>
<td>Homeless vet clinic</td>
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<tr>
<td>PM</td>
<td>Cont clinic</td>
<td>Homeless van</td>
<td>Outreach</td>
<td>Other clinical activities (based on resident preferences)</td>
<td>Didactics</td>
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<tr>
<td>Eve</td>
<td>Med student homeless clinic</td>
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Shaded areas represent required work hours.

JEOPARDY: OK VACATION: Up to 1 week OK, can accommodate up to 2 weeks.

DESCRIPTION: This one-month outpatient elective rotation will expose medicine residents to models of care that address the unique challenges of serving the needs of urban, underserved populations, including those who are chronically homeless, marginally housed, or formerly homeless (and now living in supportive housing). These individuals often contend with chronic medical conditions, drug and alcohol use, mental health disorders, lack of consistent primary care, unstable housing, and a paucity of social supports. Traditional models of care have historically been under-equipped to respond to these multiple levels of need.

EDUCATIONAL OBJECTIVES: At the end of the rotation, the resident will have gained competency in the following areas:

- Understanding the complex interaction between chronic medical and mental illness, substance use and poverty
- Describing medical conditions common in homeless and underserved populations
- Employing a patient-centered, nonjudgmental, harm reduction approach to eliciting individual goals of care and motivating change
- Working within an interdisciplinary team to assess an individual’s immediate and long term needs, develop treatment goals and engage the person in longitudinal care
- Awareness of the community and institutional resources available to address an individual’s complex needs, including intensive case management, medication adherence support, needle exchange, money management, day treatment programs, in-home support and entitlement advocacy
- Knowledge of the principles and design of supportive housing programs for chronically homeless individuals
- Recognizing the role that these care and support programs play in the continuum of the broader public health delivery system

COURSE STRUCTURE: Residents will spend six half days a week for 3-4 weeks (depending on vacation schedule) participating in the following activities:

- ½ day/week providing care, outreach, and linkage to services to individuals through the homeless van
- 1 evening/week supervising UCSF medical students at the student-run homeless clinic
- ½ day/week at the DPH Housing and Urban Health (HUH) Clinic providing urgent care services and/or observing primary care visits with individuals in supportive housing
- ½ to 1 day/week providing medical care at the homeless veterans clinic
- ½ day/week going out on outreach visits to supportive housing hotels with nurse practitioners and social workers from the Behavioral Health Roving Team
- ½ day attending each of the following activities: Behavioral Health Roving Team Clinical Case Conference, Needle Exchange, and the Action Point medication adherence program
Other opportunities will be available to observe psychiatric evaluations of clients in supportive housing, to visit and provide care to clients at the medical respite center, and to participate in other experiences based on the learners interests.

**DIDACTICS:** Elective participants will receive a syllabus of readings relevant to the issues and experiences of the rotation that will form the basis of discussions with the course preceptor(s).

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### Intensive Care (SFGH)

**Maximum # of Residents per month:** 1

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Shaded areas represent required work hours. There is night call responsibility on this rotation.

**DESCRIPTION:** The rotation has been designed for more advanced residency level (R3) who will be expected to cover the demands of a level 1 Trauma ICU requiring a minimum of 3 in-house on-call nights each rotation. Residents may elect a minimum of 4 weeks and a maximum of 6 weeks on the UCSF/SFGH ICU. The SFGH Surgical ICU is an open unit dedicated solely to the care of Trauma, surgical and neurosurgical intensive care patients. The current ICU team is comprised of 12 full time UCSF faculty from the Division of Anesthesia (Drs. Carlisle, Pittet, Tang, & Wong), Division of Surgery (Drs. Campbell, Cohen, Dicker, Hill, Horn, & Mackersie), and the Division of Neurology (Drs. Singh & Hemphill). Faculty attendings are assigned call responsibilities on a weekly basis. A UCSF fellow is assigned each month to help lead the service. There are 2 anesthesia residents and 1 surgery resident assigned to the ICU each month and 1 on-call officer is assigned each night. An average of 2 students enrolls each month in this elective course. All rotating staff (including supervised UCSF students, UCSF Nurse Practitioners, visiting students, and other rotating clinicians from other services), are required a minimum of 3 on call nights. The house staff conducts daily radiology rounds, bedside rounds, and formal didactic presentations/lectures on core topics in intensive care. Residents and students are encouraged to make presentations. On a monthly basis, the fellow is expected to conduct a Morbidity and Mortality conference. At the end of each rotation, each resident, each student, and the fellow undertake an exit interview/evaluation conducted by the Director. Due to the increasing activities in this rotation combined with the heightened restriction in regulatory duty hours expected in residency programs, non-ICU activities (i.e. clinics, morbidity & mortality conferences, grand rounds) are strongly discouraged during this rotation in order to optimize the learning experience the rotation has to offer.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will have learned the:

- Institution, maintenance and weaning from mechanical ventilation.
- Emergency airway management of the critically ill.
- Hemodynamic monitoring (indications, techniques for line insertion and data interpretation).
- Management of sedation and analgesia in the critically ill.
- Management of neuromuscular blockade in the critically ill.
- Management of the patient with the adult respiratory distress syndrome.
- Management of the critically ill trauma patient.
Intensive Nephrology (SFGH or Moffitt-Long)

Maximum # of Residents per month: 1 @ each site

KEY HALF-DAYS:

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<tbody>
<tr>
<td>A</td>
<td>Renal Grand Rounds</td>
<td>Inpatient Rounds</td>
<td>Clinical Case Conf</td>
<td>Two of four weekends</td>
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<tr>
<td>P</td>
<td>Inpatient Rounds/ Renal patho-phys. Course</td>
<td>Inpatient Rounds</td>
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Shaded areas represent required work hours.

JEOPARDY: No VACATION: Up to 1 week OK.

DESCRIPTION: This rotation is designed for residents considering a career in Nephrology, and will provide interested residents with the opportunity to function as a nephrology fellow. The rotation may be taken at SFGH or at Moffitt-Long. Residents will function as fellows and will work closely with the nephrology attending. With the direct supervision of the attending, the resident will place temporary dialysis access, write dialysis and CVVH orders, and evaluate all in-patient nephrology consults. As part of the nephrology consult service, residents round with the team (fellows, attending, residents and students) daily and the resident is in charge of the weekly case conference and one journal club presentation. Conferences include a weekly nephrology pathophysiology conference, Renal Grand Rounds, clinical case conference, and Renal Pathology Conference. Under the direct supervision of the nephrology attending, the resident would share the monthly call with the other fellow. The resident would also receive a brief introduction to the management of chronic dialysis patients.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:

- Diagnose the etiology with the appropriate use of diagnostic tests and manage the complications of acute renal failure including drug dosing.
- Address the specific needs of patients with renal failure in the intensive care unit.
- Diagnose and manage nutritional issues specific to patients with acute and chronic renal failure.
- Diagnose the etiology and manage acid-base disorders and fluid and electrolyte disorders.
- Diagnose the etiology and manage patients with hematuria and/or proteinuria.
- Know the indications, procedures, the complications of acute hemodialysis, and continuous venous-venous hemofiltration-dialysis (CVVH-D).
- Educate patients, know the indications, prepare the follow-up of patients requiring maintenance renal replacement therapy.
- Insert and know the complications of temporary catheter.
- Manage a consultative team including the teaching of students, scheduling acute dialysis, and participation in teaching during attending rounds.
- Become proficient in performing the urinalysis.

Intensive Care (9-ICU)

Maximum # of residents per month:
1 elective (this is on top of the 2 we already get)

KEY HALF-DAYS:

CAN THIS ELECTIVE BE STRUCTURED BY HALF-DAY?: No

OVERALL STRUCTURE OF ELECTIVE, BY HALF-DAY: morning rounds, patient care in the afternoons

JEOPARDY: No VACATION: none

DESCRIPTION: Residents on the ICU service learn to provide critical care for patients with a variety of medical and surgical issues involving: acute respiratory failure, ARDS, sepsis, cardiac dysfunction, renal failure, and neurologic disorders. Residents become
familiar with techniques of hemodynamic monitoring and ventilatory management of critically ill patients, and become consultants in the care of patients with multisystem organ failure.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:
- Describe the indications and techniques for invasive monitoring of the critically ill patient.
- Assess and appraise a critically ill patient for respiratory failure and need for airway management.
- Differentiate the drugs used for patient sedation and analgesia in the ICU.
- Develop a treatment plan for the patient with multi-organ system failure.

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**Nephrology (Moffitt-Long)**

*Maximum # of residents per month: 2*

**KEY HALF-DAYS:**
- Wed AM (case conference/journal club and renal grand rounds)
- Wed PM (nephrology clinic)
- Fri PM (nephrology clinic)

**Schedule:**
- Mon 12:30PM, case conference
- 1st/3rd Monday of each month, renal pathology conference
- 2nd/4th Monday of each month
- Tues. PM / Wed. PM – Nephrology Clinic, Mt Zion
- Thursday PM – Inpatient rounds (no longer Mt Zion nephrology clinic)
- Fri. PM – Nephrology Clinic ACC Bldg

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<tr>
<td>AM</td>
<td>Inpatient Rounds</td>
<td>Fellow’s core curriculum</td>
<td>Case Conf. / Journal Club &amp; Grand Rounds</td>
<td>Inpatient rounds</td>
<td>SFGH Nephrology Clinic Patient rounds</td>
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<tr>
<td>PM</td>
<td>Inpatient rounds</td>
<td>Inpatient Rounds Research Conf.</td>
<td>Inpatient Rounds</td>
<td>Mt. Zion Nephrology Clinic Patient rounds</td>
<td>Inpatient Rounds Moffitt-Long Renal Clinic</td>
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</table>

*Shaded areas represent required work hours.*

**JEOPARDY:** Allowed for month-long elective, discouraged for a two-week rotation – I think jeopardy should be discouraged for all 2 – week electives.

**VACATION:** Allowed for month-long electives, not allowed for 2-week electives.

**DESCRIPTION:** This rotation provides a comprehensive exposure to outpatient and inpatient Nephrology. The resident is encouraged to attend two half-day Nephrology clinics per week. Other duties include seeing inpatient consults and participating in inpatient rounds, Nephrology case conference (7:30 AM on alternating Wednesdays in Room C130, 12:30PM on 1st/3rd Mondays of each month in HSE 672), Nephrology Grand Rounds (8:00 – 9:00 AM Wednesdays, Room C130), renal pathology rounds (12:30PM 2nd and 4th Mondays of each month, room M580), and the weekly fellows core curriculum conference (7:45 AM Tuesdays, HSE 672). Other possible experiences include: kidney transplant clinic, transplant inpatient rounds, and outpatient hemodialysis rounds; these possibilities should be discussed with Kerry Cho prior to the rotation. There is no call for this elective.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:
- Perform complete nephrology consultations (including history and physical examination, microscopic urine sediment examination, differential diagnosis, diagnostic evaluation, treatment, indications for dialytic therapy).
- Understand the evaluation, differential diagnosis, and management of acute kidney injury, chronic kidney disease, hematuria/glomerulonephritis, proteinuria/ nephritic syndrome, and other kidney diseases.
- Understand the different forms of renal replacement therapy including peritoneal dialysis, hemodialysis, and continuous renal replacement therapy.
- Manage patients with acute or chronic renal failure, including management of anemia, renal osteodystrophy, vascular access, and hypertension.
### Nephrology (SFGH)

*Maximum # of residents per month: 2*

**KEY HALF-DAYS:** Tues. AM / Thurs. AM / Fri. PM

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<tr>
<td>Transplant Renal</td>
<td>VAMC Renal Clinic</td>
<td>Renal Grand Rounds</td>
<td>SFGH Renal Clinic</td>
<td>Clin. Case Conference</td>
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<td>Rounds</td>
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**Administrator:** Jep Poon  
476-4617 tel  
jpoon@medsfgh.ucsf.edu

**KEY HALF-DAYS:** Tues. AM / Thurs. AM / Fri. PM

**DESCRIPTION:** This rotation provides a comprehensive exposure to outpatient and inpatient nephrology. The resident is expected to attend at least two half-day renal clinics a week at the two medical centers. Other duties include seeing inpatient consults and participating in inpatient rounds, clinical case conference, renal grand rounds, and the weekly renal pathophysiology course. Those interested may also attend transplant renal clinic, transplant inpatient rounds, and/or outpatient hemodialysis experience with Dr. Rodriguez. There is no call for this elective.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:

- Perform complete renal evaluations (including the urinalysis, differential diagnosis, indications for dialysis, treatment) of patients with acute renal failure, and glomerular diseases.
- Perform inpatient and outpatient evaluations of patients with hematuria, proteinuria, and other renal diseases.
- Discuss the different forms and indications for peritoneal dialysis, hemodialysis, transplantation, and CVVH.
- Manage patients with acute or chronic renal failure, including management of anemia, renal osteodystrophy, vascular access, and hypertension.

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### Neurology-Outpatient (Moffitt-Long)

*Maximum # of residents per month: 1*

**KEY HALF-DAYS:** Tues. AM / Tues. PM / Thurs. PM

**MINIMUM ATTENDANCE:** 8 OF 10 HALF-DAYS/WK

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<tbody>
<tr>
<td>Movement (MVMT)</td>
<td>Peripheral Nerve (PRNF)*</td>
<td>Movement (MVMT)*</td>
<td>Memory Disorders*</td>
<td>General</td>
</tr>
<tr>
<td>General</td>
<td>Epilepsy*</td>
<td>General</td>
<td>Stroke (CVA)*</td>
<td>General</td>
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*denotes subspecialty clinics - - 12/01. Shaded areas represent required work hours.

**JEOPARDY:** NOT ALLOWED  
**VACATION:** NOT ALLOWED

**DESCRIPTION:** This rotation takes place in the outpatient setting and consists of five full days of clinics (available clinics include general neurology, stroke, peripheral nerve, epilepsy and memory disorders). Conferences include grand rounds and clinic conference as well as weekly spine/nerve and epilepsy conferences. There is no call for this rotation. Residents should contact Diana Juan at least three months prior to the elective to set up their specific schedule.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:

- Perform and interpret a detailed neurologic examination.
- Describe the presenting features, diagnosis, and treatment of common outpatient neurologic conditions, including abnormal speech, abnormal vision, altered sensation, disturbed gait and coordination, dizziness/vertigo, headaches, loss of consciousness, localized pain syndromes, seizures, memory impairment, tremor, and weakness/paresis.
Neurology Consultation
(Moffitt/Long)

Maximum # of residents per month: 1

KEY HALF-DAYS: Tues. AM / Tues. PM / Thurs. PM

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Shaded areas represent required work hours.

JEOPARDY: NOT ALLOWED  VACATION: NOT ALLOWED

DESCRIPTION: This rotation takes place in the inpatient setting and consists of providing consults to patients at Moffitt/Long hospital. Conferences include attending rounds, morning report, Wednesday clinical conferences and grand rounds. There is no call for this rotation.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Perform and interpret a detailed neurologic examination.
• Describe the presenting features, diagnosis, and treatment of common neurologic disorders encountered in the inpatient setting, including: abnormal speech, abnormal vision, altered sensation, confusion, disturbed gait and coordination, dizziness/vertigo, loss of consciousness, memory impairment, seizures, and weakness/paresis.

Neurology Consultation (SFGH)

Maximum # of residents per month: 1

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<tr>
<td>PM</td>
<td>LP Clinic*</td>
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<td>1:30 Neuro-Imaging Conference</td>
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Shaded areas represent required work hours. *for reference only; NOT required if continuity clinics or other responsibilities are in conflict

JEOPARDY: NOT ALLOWED  VACATION: NOT ALLOWED

DESCRIPTION: This rotation takes place in the inpatient setting and consists of providing consults to patients at SFGH. Conferences include attending rounds, morning report, EEG and neuroimaging conferences, and grand rounds. There is no call for this rotation.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Perform and interpret a detailed neurologic examination.
• Describe the presenting features, diagnosis, and treatment of common neurologic disorders encountered in the inpatient setting, including: abnormal speech, abnormal vision, altered sensation, confusion, disturbed gait and coordination, dizziness/vertigo, loss of consciousness, memory impairment, seizures, and weakness/paresis.

Oncology Outpatient -- UCSF-Mt. Zion

Cancer Center

Maximum # of residents per month: 2

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<tr>
<td>AM</td>
<td>GI, GU, Breast, Thoracic, General and CNS Oncology</td>
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Schedules will be crafted based on availability and resident preference.
DESCRIPTION: The overall objective of this rotation is to provide exposure to a variety of outpatient oncology patients. At the end of the rotation, the resident should be able to perform a thorough history and physical of an oncology patient, assimilate clinical, radiologic and pathologic data and develop an initial and/or ongoing treatment plan.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Describe the epidemiology, presenting symptoms, diagnostic evaluation, general prognosis, and treatment options for common cancers.
• Effectively interact with the entire oncology treatment group; including surgery, radiation oncology, hospice and social work.
• Develop the ability to discuss and initiate palliative care, including hospice care, DNR status, and acute/chronic symptom management.

Oncology Research -- UCSF-Mt. Zion
Dr. Emily Bergsland
dr.Emilyb@medicine.ucsf.edu
Cancer Center
353-7139 tel; 353-7150 fax; Box 105
Maximum # of residents per month: 1
Requires advanced permission of the elective director

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<td>GU Oncology</td>
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<td>Continuity Clinic</td>
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Shaded areas represent required work hours.
JEOPARDY: Preferably not for 1 mo elective. Yes for 2-3 mo VACATION: No for 1 mo elective. Yes for 2-3 mo elective

DESCRIPTION: This elective will allow a resident to work closely with a faculty member in order to plan and execute a research effort. The options include a clinical or laboratory project and will take into consideration resident interests and experience and the faculty member’s area of expertise. Advanced planning is required so that a project that can be accomplished in the limited time available. The GU group has had the most productive research interactions with residents in the past, but projects could be developed in one of the other major settings such as thoracic, GI, Breast Oncology. Residents may either contact a prospective mentor first or the elective director if they require assistance in coordinating this elective. Permission of a faculty mentor is required before starting this elective. Each resident’s schedule will include one to two clinics per week in the field of interest to accompany the time spent in research. The resident along with the selected faculty mentor will devise a plan for the research, which should include regular meetings with the mentor or research team. Much of the time will be self-directed.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
• Understand the need for appropriate approvals required before initiating research.
• Develop a hypothesis to be tested based on possible research questions posed by the faculty mentor.
• Discuss possible approaches to testing the hypothesis.
• Devise, with the help of the faculty mentor, a research plan.
• Develop basic skills in research methods appropriate to the selected project.
• Present your research findings, either to the research team or mentor, or more formally when the opportunity exists.

Palliative Care Service (Moffitt-Long)
Dr. Meredith Heller
dr.meredith.heller@ucsfmedctr.org
Tel: 415-514-1758, Box 0131
Meredith.heller@ucsfmedctr.org
Maximum # of Residents per month: 1
KEY HALF-DAYS: none, very flexible
Elective can be 2 weeks or 1 month

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<td>AM</td>
<td>Palliative Care Service Rounds</td>
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<td>PM</td>
<td>Consults/Site Visits</td>
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<td>Biweekly Palliative Care Service Team Mtg 1:30-3:30 PM</td>
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Shaded areas represent required work hours.
JEOPARDY: ok VACATION: up to 1 week ok
**DESCRIPTION:** During your rotation with the PCS, you will have the opportunity to care for patients with serious and life-threatening illness. You will serve as a part of the palliative care team made up of an attending physician, nurses, pharmacist, chaplain and social worker. The elective is structured to provide exposure to palliative care in many settings, but is focused on acute, inpatient palliative care. In addition to rounding daily with the PCS, you will have the opportunity to see hospice patients at home and visit inpatient hospice units. Residents will round with the Palliative Care Service, see initial and follow-up consultations, will attend Palliative Care Service interdisciplinary team meetings, discuss cases and management issues with Consult Attending physician, visit other important sites of palliative care including Zen Hospice Project, Laguna Honda Hospital Hospice Unit, Palo Alto VA Medical Center Inpatient Hospice Unit, Hospice by the Bay. Residents will also have an opportunity to complete a project if they wish.

**EDUCATIONAL OBJECTIVES:**
- Describe management of pain and other distressing symptoms including dyspnea, rattle, nausea, malignant bowel obstruction, agitation, depression, anxiety, and constipation in patients with serious, chronic and terminal illness.
- Demonstrate how to conduct an effective family meeting.
- Demonstrate how to communicate effectively and empathically with patients regarding advance directives and advance care planning.
- Describe how hospice, home care and inpatient palliative care interface to best serve patients with serious, chronic and terminal illness.
- Understand emotional, spiritual and cultural issues in the approach to patients with serious, chronic and terminal illness.

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**Procedure Elective (Mount Zion)**

Maximum # of Residents per month: 1

Dr. Jeanne LaBerge
jeanne.laberge@radiology.ucsf.edu
Administrator: Kimberly Morrell
353-1300

KEY HALF –DAYS: Mon. PM/ Tues. PM/ Wed. AM/ Thurs. AM & PM/ Fri. AM
Vacation: Ok, up to one week
FIRST DAY: please report to Moffitt IR Reading Room 361, at 7:45 am for orientation

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**DESCRIPTION:** This rotation is based at Mount Zion in Interventional Radiology. Residents will join the IR team for a one-month period receiving close supervision and teaching in a variety of procedures including placement of many different types of central lines, ultrasound-guided thoracentesis, paracentesis, PICC line placement and other IR procedures such as percutaneous biopsy and abscess drainage. Residents will participate in the care and management of IR patients and in the evaluation of the appropriateness of IR procedures.

There is no call for this rotation.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:
- Place central lines.
- Perform and supervise thoracentesis, paracentesis
- Use ultrasound guidance for IJ catheter placement
- Place PICC lines
**Pulmonary Consult Rotation (Moffitt-Long)**

*Maximum # of residents: 2*

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**Dr. Lorriana Leard, MD,**

476-8287 tel; 476-5712 fax

**Administrator: Patrick Manalantas**

476-6926 tel; 476-5712 fax

patrick.manalantas@ucsf.edu

---

**KEY HALF-DAYS:** Educational conferences: (1) Tri-hospital Pulmonary Case Conference/Lecture Series on Tuesday afternoons at 4:30pm, (2) Pulmonary Grand Rounds on Tuesdays, 8:00 – 9:00 am, (3) Pulmonary Physiology Conference on Fridays, 8:00 -9:30am, and (4) Radiology conference Fridays at 11:00am.

**AM**

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*Shaded areas represent required work hours.*

**JEOPARDY:** OK

**VACATION:** Prefer only 1, but 2 allowed.

**DESCRIPTION:** The Pulmonary Consult Service at Moffitt-Long Hospital is a busy consult service designed to introduce medicine residents to the evaluation and management of patients with pulmonary disease. Residents will learn how to perform a detailed pulmonary history and physical examination, to interpret pulmonary function tests, and to interpret chest imaging, and will be instructed in the indications for performing bronchoscopic procedures (including bronchoalveolar lavage as well as transbrachial and Wang needle biopsies.) The service usually consists of the pulmonary attending, one pulmonary fellow, medical resident(s), and often a medical student. Residents perform initial consultations and follow patients on the service. Residents are invited to attend and sometimes participate in the performance of all procedures (ie. Bronchoscopies, pleurodesis, pleural biopsies) performed by the Pulmonary service. There is no night or weekend call for residents.

**CAN THIS ELECTIVE BE STRUCTURED BY HALF-DAY?** : No- Procedures such as bronchoscopies and rounds with the attending vary throughout the day depending on the clinical needs of the service.

**OVERALL STRUCTURE OF ELECTIVE, by HALF-DAY:** The Pulmonary Consult Service rounds on inpatients throughout the day. The high level of activity on the service makes regularly scheduled rounds difficult, but Residents are excused to attend educational conferences offered by the Department of Medicine and Pulmonary educational activities:

- Monday AM – Rounds with Attending & Procedures as indicated
- Monday PM – Lung Transplant Lecture, Rounds with Attending & Procedures as indicated
- Tuesday AM – Pulmonary Grand Rounds, Rounds with Attending and Procedures as indicated
- Tuesday PM – Tri-hospital Pulmonary Case Conference / Lecture Series, Rounds with Attending & Procedures as indicated
- Wednesday AM – Rounds with Attending and Procedures as indicated
- Wednesday PM – Rounds with Attending and Procedures as indicated
- Thursday AM – Rounds with Attending and Procedures as indicated
- Thursday PM – Rounds with Attending and Procedures as indicated
- Friday AM – Pulmonary Physiology Conference, Pulmonary – Radiology conference
- Friday PM – Rounds with Attending and Procedures as indicated

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:

- To learn to perform a detailed pulmonary history and physical examination.
- To learn how to recognize and manage a variety of pulmonary diseases including asthma, COPD, lung cancer, pulmonary infections, interstitial lung diseases, cystic fibrosis, and pleural disease.
- To learn to interpret pulmonary function tests.
- To become familiar with chest radiographic imaging and interpretation.
- To learn the appropriate indications for pulmonary procedures such as bronchoscopy, transthoracic needle aspiration, thoracentesis, chest tube placement, pleural biopsy, pleurodesis, and referral for thoracic surgery.

**WILL THE ELECTIVE ACCEPT INTERNS:** Yes
Pulmonary (SFGH)

Maximum # of Residents per month: 1

Dr. Courtney Broaddus
206-3513 tel, 206-4123 fax; Box 0854  
cbroaddus@medsfgh.ucsf.edu
Administrator: Mary DeJesus
206-8314 tel, 695-1551 fax; Box 0841
mdejesus@medsfgh.ucsf.edu

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Shaded areas represent required work hours.

JEOPARDY: OK  VACATION: Up to 2 weeks OK.

DESCRIPTION: This rotation consists of performing consultations for inpatients and outpatients. Residents may also assist in performing procedures and in interpreting pulmonary function studies and sleep studies. Conferences include weekly grand rounds and M&M, and a variety of pulmonary conferences, including a Tuesday afternoon tri-hospital clinical conference at UCSF, a Thursday noon SFGH clinical conference, and a Friday morning pulmonary physiology seminar at UCSF. The resident will present 1-2 cases at the tri-hospital pulmonary conference and 2-4 cases at the SFGH Thursday noon clinical conference. There is no call for this rotation.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
- Obtain a thorough history and perform an appropriate physical examination of a patient with pulmonary illness.
- Understand pulmonary anatomy and pathology via interactions with pathologists and radiologists, and by participation during fiberoptic bronchoscopy.
- Understand the uses and limitations of pulmonary function testing and of bronchoscopy for diagnosis.

“Conversational” Radiology (VAMC)

Maximum # of Residents per month: 2, but must be
Ok’d by Dr. McCowin

Dr. Marcia J. McCowin
221-4810 x3596/ 750-2039 tel; 750-6944 fax; Box 0114
marcia.mccowin@radiology.ucsf.edu
Administrator: Randy Ortega
221-4810 X3305
randy.ortega@va.gov

KEY HALF-DAYS: MON. AM/ PM, THURS. PM

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<tr>
<td>PM</td>
<td>1:30 Radi/Pulm conferences Workcharts (as needed)</td>
<td>CT Workcharts</td>
<td>1:30 Chest Med/Surg Workcharts</td>
<td>CT Workcharts</td>
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Shaded areas represent required work hours.

JEOPARDY: OK  VACATION: Up to 2 weeks OK

DESCRIPTION: This rotation takes place at the San Francisco VA Department of Radiology and consists of 5 full mornings of Radiology interpretation per week combined with full-to partial afternoons of Radiologic interpretation and participation in clinical conferences.

The core schedule:
1. Interactive work charts and assigned reading which make it possible for the Medical resident to work parallel with the Radiology resident.
3. Morning and afternoon CT and ultrasound readouts, and can include GI and bone radiology, MRI, Nuclear Medicine, biopsies, etc. if arranged.
4. Mandatory conferences: Mon. 1:30-2:30 p.m. Radiology/Pulmonary, Thurs. 1:30-2:30 p.m. Rad/Pulm/Surg/Onc.
5. Optional conferences: Tumor Board.
6. Daily teaching conferences with the Radiology Residents.
7. There is no call for the rotation.

**EDUCATIONAL OBJECTIVES:** At the conclusion of the elective, the resident will be able to:

- Maximize their use of Radiologic consultation through the following increased knowledge and abilities.
- Gain advanced skill and understanding of Chest X-ray and ICU film interpretation, including limitations and pitfalls.
- Recognize normal CT anatomic structures and common abnormalities.
- Recognize abdominal ultrasound anatomic structures and common abnormalities.
- Depending on the focus and length of the rotation, the resident will gain an increased depth of understanding and interpretive skills in chest, abdomen, and bone plain films, CT and ultrasound, indication and utility of various imaging studies, and in the differential diagnosis and work-up of imaging abnormalities. Some work in neuroradiology, MRI, and interventional radiology may be possible.

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**Rheumatology (3-Hospital)**

*Maximum # of Residents per month: 2*

**KEY HALF-DAYS:** Mon. PM / Thurs. PM – Parnassus
Wed AM – SFGH, Fri AM – VAMC

Administrator: Gracie Bernacki

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<tr>
<td><strong>AM</strong></td>
<td>Didactic Conference 8:30-9:30 AM UC U-381</td>
<td>Clinic at SFGH Pre-clinic conference 8:00-8:30AM Bldg 30 Rm 3300</td>
<td>UC Grand Rounds Rm N225 Noon</td>
<td>Clinic at VAMC Rheum Clinic 8:30-12:00PM Bldg 200 Module 1 Ground floor 750-2104 Post-clinic Conference 12:00-1:30PM 750-2104</td>
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<td><strong>PM</strong></td>
<td>Rheum clinic 1:00-4:45 PM UCSF ACC Plaza Level Post-Clinic Conference 4:45-5:30PM 353-2497</td>
<td>VA Fellow-Clinic VAMC 1:00-4:30PM Bldg. 200 Module 1 Ground Floor 750-2104 Lupus Clinic 1:00-4:00PM UCSF-ACC Plaza Level (Optional)</td>
<td>Evening Rheum Journal Club (2nd Wed of Month) Location varies</td>
<td>Rheum Clinic 1:00-4:45PM UCSF ACC Plaza Level Post-Clinic Conference 4:45-5:30 PM 353-2497</td>
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Orientation: The “attending of the month”, the fellow, and the resident will meet on the first day of the rotation to discuss in-patient responsibilities and teaching sessions. Outpatient orientation will happen at the first clinic session.

*Rheumatology Journal Club—Last Tuesday of the month – 8:30-10:00 AM*
Resident “10-minute bullet”. Each resident may choose a topic to review and present at the end of the rotation. The presentations will take place toward the end of the month after Tuesday morning lecture.

Optional
- Skeletal Radiology – one Tuesday a month at 11:00 AM (varies)
  - Review teaching file, read films with radiologists.
  - Bone Reading Room
  - 3rd floor ACC
- Orthopedic Surgery
  - Watch a joint replacement
  - Contact Robert Gilbert, M.D. (668-8010) or Kevin Bozic, M.D. (502-2235)

Please contact the Rheumatology Fellows regarding time and place of inpatient rounds.

JEOPARDY: OK  VACATION: 1 week maximum
CAN THIS ELECTIVE BE STRUCTURED BY HALF-DAY? Yes

DESCRIPTION: Three ½-day clinics followed by post-clinic teaching conference. In-patient rounds with consulting service fellow and attending. Didactic teaching conference Tuesday morning. Ten minute “bullet” presentation at the end of the month.

EDUCATIONAL OBJECTIVES: At the conclusion of the elective, the resident will be able to:
- Evaluate patients with rheumatic diseases and form a differential diagnosis.
- To be able to generate an appropriate differential diagnosis in a patient with rheumatic complaints.
- To understand treatment options in a patient with a rheumatic disease.

WILL THE ELECTIVE ACCEPT INTERNS? Yes