#### Cardiology Consultation [ 6 weeks ] {DA-1 Resident Year}

The cardiac consults rotation is designed to strengthen the resident's familiarity with the cardiovascular system. The resident will receive instruction on reading and interpreting ECGs. The resident will also be guided by cardiac fellows on the basics of interpreting echocardiograms and will be shown how to perform a focused cardiovascular physical assessment. The resident will become more skilled in preoperative cardiac risk stratification and be expected to input notes and present these risk assessments to attendings and fellows. Finally, cardiovascular medication classes will be reviewed as well as anticoagulation therapy common to the patient with cardiac issues. The resident will leave the rotation with a better understanding of CAD, CHF, HTN, HLD and a variety of valvular and electrophysiological problems that are commonly encountered in elderly/compromised cardiovascular patients.

#### Medical Consultation and Medical Floors [ 9 weeks ] {DA-1 Resident Year}

The medical consults rotation is intended to broaden the resident's medical knowledge base. Initially, the resident is treated like a  $3^{rd}/4^{th}$  year medical student, depending on their progress and background. The resident is taught how to perform complete physical exams and how to present patients to attending physicians. By the end of the rotation, the resident is treated in a manner similar to a PGY1 general medical intern or PGY2 resident. They are expected to see multiple patients throughout the day, formulate a medical management plan, and present this plan to attending physicians for their approval and implementation on the floors. Key skills that are gained during this rotation include managing diabetes on a sliding scale, managing hypertension, as well as understanding how to interpret lab values and provide appropriate corrective therapy. Perioperative risk stratification from both a cardiac and pulmonary perspective is reviewed and residents are expected to present risk stratification for patients scheduled for surgery based on these assessments. Anticoagulation therapy and bridging of therapy is reviewed as well as the medical management of hypertension using angiotensin converting enzyme medications, angiotensin receptor blockers, and beta-blockers in the perioperative period. This is a rotation that provides a vast array of basic medical knowledge and provides a basis on which to build a multitude of medical concepts necessary for success later in residency.

<u>The medical floors rotation</u> is an amalgamation of numerous concepts learned during the PGY1 year. The resident is expected to rotate with a medical management team and present and manage cases with attendings and other medical residents. This rotation helps solidify the comprehensive

nature of medical management in a hospital setting and draws off of a variety of educational experiences learned throughout the year during other rotations.

# PACU-ICU [ 4 weeks ] {DA-3 Resident Year}

This is a special rotation for our DA-3 residents during the months of July, August and September of their third year. They are responsible for the PACU-ICU from 7am to at least 8pm. During this time, they are responsible for:

- Admitting patients to the PACU-ICU
- Reviewing and rewriting orders when necessary (especially during these months when there are new anesthesia residents working in the operating room
- Treating hypertension as well as hypotension in post- operative patients
- Treating acute pain following surgery
- The residents are also on their difficult airway rotation during the PACU-ICU rotation. During this time, they will do more than 35 fiberoptic intubations as well as other advance airway management skills
- Respond to "Rapid Response Codes' throughout the medical center.
- Re-intubate patients on the floor when paged or contacted.
- Respond to all Trauma Codes in the Emergency Department.

#### Stony Brook Hospital is the only designated Trauma 1 Center in Suffolk County

## Radiology [ One Week ] {DA-1 Resident Year}

This rotation is designed to familiarize the resident with the fundamentals of radiographic interpretation in the medical setting. Namely, CT scans, MRIs, and chest radiography are reviewed. Residents are expected to recognize normal parameters that are assessed in a chest radiograph to provide a foundation for future learning in the clinical setting.

# Code Week [ One Week ] {DA-1 Resident Year}

For this week, the paired DA-1 residents are on the Rapid Response Team for University Hospital. They go to every code and take part in rescuing patients with other Rapid Response Team members. Following the codes there is a debriefing session that is conducted by the director of the Rapid Response Team.

## Pediatric Medicine [ 4 weeks ] {DA-2 Resident Year}

During the DA-2 year, the residents are on a 4-week pediatric medicine rotation. There are 3 parts to this rotation:

- 2 weeks in the hospital working alongside the pediatric medicine residents who are treating patients who are admitted to the hospital.
- 2 weeks in one of the hospital's ambulatory pediatric facilities. At this facility, they are learning how to diagnose and treat common illnesses of childhood. They are also learning how to evaluate patients who are being scheduled for anesthetics at the hospital.
- Every Friday of the rotation, the resident is assigned for 8 hours to the Stony Brook University Hospital Emergency Department. This experience provides the resident with diagnosing and treating common emergencies of childhood, i.e. asthma, allergic reactions, acute upper respiratory infections, trauma, etc.

#### Preoperative Services [ 6 weeks ]

## {DA-1 Resident Year- 2 weeks & DA-3 Resident - 4 Weeks}

The perioperative services rotation is designed to reinforce the importance of the nuances involved in a complete and comprehensive preoperative assessment. Highlights include a review of focused physical exams, airway exams, appropriate ordering of diagnostic tests, lab evaluation and EKG interpretation. Finally, perioperative guidelines are examined in detail to better guide the resident in determining the necessity of a variety of preoperative test. Possibilities include everything from blood work to a complete cardiovascular stress test. Residents describe this rotation as one of the best experiences of their entire rotation experience.