Third year clerkship in Medicine
Harlem Hospital Rotation

The Ward Team

Each student is assigned to an intern and resident on one of the general medicine ward services. Two residents, two interns, one or two students and their two attendings constitute a ward team. Your intern and resident will orient you to the daily routine. You will generally spend your day with your team, except when you are in one of the student didactic sessions.

Daily Routine

7:00 - 7:30 A.M. Pre-rounds. Students should arrive at the Hospital at the same time as their intern, generally about 7:00 am. During this time the student should see and examine each patient s/he is following, and gather any information about events overnight.

7:30 - 9:00 A.M. Work rounds with the House staff. This is the time for the intern and resident to assess their patients and to make plans for the day. You will be expected to contribute the information you have gathered (reporter), your interpretation, and your ideas about what is to be done next (manager).

9:00 - 11:00 A.M. Attending Rounds: Presentations - All the same advice on presenting well that is included in the section on the ward team for the CUMC rotation applies to the Harlem rotation as well. The ward attending is responsible for all the patients and the student should expect to be involved with the attendings in discussions about the progress of their patients.

On Call:

BE THERE - be present on the ward and in the ED with your intern and resident. You are responsible for the work-up of one patient each night on-call. For each of these patients you are expected to do a formal complete write-up for your preceptor to be handed in no later than 48 hours after admission (minimum of six total). Prepare to present your patient on attending rounds. Your resident should help you with your presentation (but not your write-up). You should follow your patients daily, and do as much of the care as possible under the close supervision of your intern and resident. This should allow you to develop a cadre of 3-4 patients whom you follow with your intern. Your patient load may vary—some patients are much more complex than others. In general it is best to know everything about a few patients, than try to be like the intern and carry as many as possible. Although your night on-call affords the opportunity for you to admit a patient this should not be the sole focus of your attention. You are urged to work with your intern as other patients are admitted and participate in the intern's activities as an "apprentice".

Regarding the work-up of new admission: Find out information for yourself! If possible, take your own history from scratch. Do not get your history from the computer—it is sometimes misleading!

You are expected to perform your own physical exam. Rectal and pelvic examinations on female patients are to be done under the direct supervision of a house officer.

The Medical Record

Progress notes must be concise and legible - writing a "good" chart note takes skill and art. Use the S.O.A.P. format, include a limited, relevant exam and note progress and plans for the patient's main problem or problems. Notes should be reviewed and corrected, as needed, by the intern and/or house resident.
**Procedures**

All procedures that you perform should be supervised by an appropriately credentialed resident and recorded in a formal procedure note. The procedure note should include the indication.

**Other Ward Responsibilities**

There are many skills that must be acquired in order to take proper care of your patient, particularly in an acute setting - placement of intravenous catheters, drawing venous and arterial bloods, doing an electrocardiogram for example. You are likely to have many opportunities to learn these procedures. The more skilled and confident you become in these tasks the more effective you can be in assessing and initiating treatment. Don't lose this opportunity. The intern is always busy, patients are always sick and some get sicker - suddenly - before they get well. Some routine tasks will be expected of you as you work with your intern and your patients in these busy and often difficult times. Days and early evenings when you are not on-call offer opportunities to help with procedures, accompany your patient to special procedures, speak with your patients and their families, etc. However, do not overdo. You do not need to be doing tasks on patients other than your own, and you need to make time to read, prepare your presentations and your write-ups.
Schedule of student didactic sessions (at Harlem)

- Preceptor Sessions (2-3/Week) 1 1/2 - 2 hours each
- Psychiatry Sessions (Weekly) Thursdays, 2:30-3:30 p.m.
- EKG sessions (2-3 Weekly sessions) Monday 11:30 a.m.
- Radiology Sessions (Weeks 2 and 3) Wednesdays 2:30-3:30 p.m.
- Meeting with Harlem Clerkship Director (Week 1 and 5) Wednesdays 2:30

Department of Medicine Conferences

- Grand Rounds Tuesdays 8:00 a.m. Martin Luther King Pavilion Room 6101
- Housestaff noon conferences Wed, Thurs, Fri 11:30 a.m. room 6101

Harlem Hospital Contact Information

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