

Pediatric Hospitalist Rotation Overview and Expectations

Team members:

- Attending physician
- PGY-3
- PGY-1
- Sub-intern
- 3rd year medical student

Patient census:

- Pulmonary
- Surgical subspecialties (including but not limited to neurosurgery, orthopedics, etc.)
- NICU/PICU transfers
- Community pediatrician referred patients
- 4C overflow
- Consults for other primary services

**Note: Learners are not restricted from any patients unless specifically requested by a family or referring physician

Resident and Student Census (estimated):

- 3rd year medical students will follow **up to FIVE** patients under direct supervision of the PGY-1
- Sub-interns will follow **roughly 2/3 of the number of patients that the PGY-1 is following** under direct supervision of the PGY-3
- PGY-1 interns will follow **on average SIX** patients, and there must be PGY-1 involvement on every pulmonary patient
- PGY-3 residents will oversee the care of **ALL** of the patients on the team, and may be asked to also be the primary resident for additional patients in times of high census, or in select circumstances at the discretion of the attending physician

Daily Expectations:

- The team is expected to pre-round on all patients prior to morning report. This includes examining the patient and reviewing any new studies or lab data available. Report any immediate medical issues to the PGY-3 for guidance.
- Attending Rounds will begin daily at 9am (weekends at 8am) – meet in the hospitalist conference room on 4CMC
- All team members should be prepared for rounds and be familiar with each patient under their care, including recent vital signs, updated labs and study results, current medications and dosing, nursing concerns, and relevant social issues.
- The PGY-3 residents should have an active role in daily rounds providing teaching for both the medical students and interns on the team.
- After rounds, daily work should be done and notes should be completed and placed in the patient charts
- Time permitting, didactic sessions may be led by the attending physician and/or the supervising resident
- The entire team will meet again to do “tuck-in” rounds between 3:30-4pm to update patient issues and get organized for evening sign out to the on call team

Afternoon checkout:

- The PGY-3 is responsible for doing checkout for all of the hospitalist team patients to the on call team
- Initially, the interns and sub-interns should observe the PGY-3 giving checkout
- Once the PGY-3 feels the other learners are capable of giving accurate and concise checkout, these roles can be reversed and the interns and sub-interns can present their checkout for the on call team

Conferences:

- Morning report 8-8:30am daily Monday through Thursday
- Pediatric Grand Rounds 8-9am Friday
- General pediatric multi-disciplinary rounds will be on Tuesday and Friday at 11:30am on 4C (PGY-3 or attending physician must be present to discuss our patients on 4CMC)
- Pulmonology multi-disciplinary rounds will be on Wednesday at 9am on 4C (entire team must be present)
- 4CMC leadership meeting will be every Thursday at 11am (attending physician and PGY-3 resident should be present when possible)
- Resident Noon Conference from 12-1pm daily Monday through Friday

Evaluations:

- All learners will get mid-rotation and end of the rotation feedback from the attending
- The PGY-3 resident should give feedback to all medical students (MS3 and MS4) at both the mid-point and end of the student rotations. It is the responsibility of the medical student to remind the resident that feedback is due at the mid-point.
- PGY-3 must complete a portfolio prior to finishing the rotation
- Evaluations will be completed by all learners at the end of their rotation in regards to both the attending physicians and the rotation experience in general

Other Issues:

- All patients being followed by a sub-intern MUST have a complete daily note written by the PGY-3
- All notes and orders written in the chart by a medical student MUST be co-signed by a resident
- Daily communication with the referring physician should be performed when indicated by the PGY-1 or PGY-3 residents (not medical students)
- All learners are expected to attend educational conferences unless prohibited by urgent patient care issues
- If the weekend resident coverage is going to be provided by a PGY-3 not on the hospitalist service, it is the responsibility of the PGY-3 on the hospitalist team to contact that resident on Friday afternoon to review any pertinent patient care issues for the weekend.