

PGY-1

JUNIOR ULTRASOUND ROTATION

LENGTH: 2 WEEKS

YEAR OF TRAINING: PGY 1

LOCATION: KINGS COUNTY HOSPITAL EMERGENCY DEPARTMENT

FACULTY LIAISONS:

Dr. Kelly Maurelus

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Dr. Randi Ozaki

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OBJECTIVES:

To obtain clinical experience with point-of-care ultrasound in the management of patients presenting to the emergency department with gynecological complaints.

To learn the differential diagnosis, workup, and management of patients presenting with common gynecologic complaints.

To become proficient at performing and interpreting the transabdominal and transvaginal pelvic ultrasound exam.

To become proficient in performing and interpreting the AAA, Renal, and FAST ultrasound exams.

SCHEDULE:

Clinical shifts: 11am-11pm on Mondays/Tuesdays/Fridays.

Exceptions:

-First Monday of Rotation 9am-9pm; shift starts after a brief orientation with one of the ultrasound faculty

-Wednesday conference

-Thursday 9am-9pm: First meet in US conference room for QA, then report to suite A for your shift

Ultrasound didactic shifts: Wednesdays, after Conference and/or on weekends. You are not expected to see patients primarily. Your only responsibility is to perform ultrasound scans.

*****YOU MUST E-MAIL DR. OZAKI OR DR. MAURELUS AT LEAST ONE WEEK PRIOR TO THE START OF YOUR ROTATION FOR FURTHER INSTRUCTION**

ROTATION DESCRIPTION: Before starting each rotation please obtain the study materials via www.sunykchsono.com

At the beginning of the rotation the resident will meet with one of the ultrasound faculty for orientation on transvaginal and transabdominal pelvic ultrasound exams, FAST/AAA/Renal exams, the use and maintenance of the ultrasound machines, as well as receive didactic material which will be posted online at sunykchsono.com.

Residents on their GYN rotation will be expected to primarily pick up patients with gyn-related chief complaints. The resident will evaluate the patient as per usual clinical care with the addition of performing a pelvic ultrasound exam whenever clinically indicated. These patients should be presented to and followed by a faculty attending that is working clinically during the shift.

If there are no patients with gynecological complaints to be seen, the resident is expected to primarily pick up patients with relatively simple chief complaints and quick dispositions. In addition to pelvic ultrasounds, the resident is also expected to become proficient in FAST, Renal and AAA ultrasounds. During this rotation, the resident is required to perform and accurately interpret **at minimum 25 ultrasounds in each application.**

All pelvic ultrasounds MUST be done under the DIRECT SUPERVISION of attending faculty. Clinically indicated ultrasound scans must be documented in Quadramed by ED Quicknote or included in the initial provider note or ED disposition note. Additionally, all ultrasound images and interpretations should be saved with results documented on the Ultrasound Data Sheet (found on clinicalmonster.com) which will be turned in at the end of the rotation. All ultrasound studies will be reviewed with a member of the ultrasound faculty every Thursday at 9 am in the ultrasound office.

The rotating intern will be responsible for maintaining all appropriate supplies and keeping the ultrasound machine clean and in its designated area. Any problems with the machine should be immediately reported to Dr. Ozaki or Dr. Maurelus, or any member of the ultrasound faculty.

In case of an unexpected absence the resident must contact the Chief Resident-on-call, the Director-on-call, and Dr. Ozaki or Dr. Maurelus. Each absence will be handled on a case-by-case basis, but in general any missed shifts will be expected to be made up either on the weekend or at another predetermined time.