

OLIVE VIEW – UCLA
GI Rotation Orientation for Fellows and Residents

General Information

Staff

Richard Hu, MD	Chief, GI Division
Simon Beaven, MD/PhD	Chief, Hepatology and GI Fellow Liaison
James H. Tabibian, MD/PhD	Director of Endoscopy, Resident Research Director, Residency Training Liaison
Lisa Toy, MD	Part-time consulting physician
Gaurav Singhvi, MD	Part-time consulting physician
Ron Koretz, MD (emeritus)	
Karla Otero-Vo, NP	

Nursing

Ruth Al-Nemri, RN	Lourdes Moreno, RN
Eduardo Alfonso, RN	Elena Salas, RN
Lourdes Hoang, RN	Maria Cunningham, LVN
Violet Ortega, LVN	Sandra Villegas (ward clerk)

Weekly Schedule

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Sat/Sun
8 AM - Noon	Outpatient GI clinic Clinic C 1 st , 3 rd , 5 th Mon Clinic B 2 nd , 4 th Mon	Endoscopy (Hu) & Consults	Endoscopy (Beaven) & Consults	Endoscopy (Tabibian) & Consults	8-10 AM GI Fellows Conference @ UCLA 10:30 – 12 Endoscopy & Consults	
12-1	Lunch	Lunch	Lunch	Lunch	Lunch	
1 – 5 PM	Endoscopy & Consults Consult Rounds	Endoscopy & Consults Consult Rounds	Endoscopy & Consults Consult Rounds	Endoscopy & Consults Consult Rounds	Endoscopy & Consults Consult Rounds	
4 – 5 PM		GI Journal Club 1st & 3rd Tues (GI Lab)	GI Pathology Conference (1st floor)			

GI Journal Club: This conference is designed to help trainees understand how to read the GI literature and to stay up to date on the ever-changing field of GI. This conference will be held twice a month with one article being presented by the rotating resident. Choice of article will be made based on interest of housestaff/fellow, relevance to the GI field (i.e. novelty), and type of article (trial, guideline review, meta-analysis, systematic review).

GI Pathology Results & Pathology Conference: All pathology results need to have follow up contact with the patient within 7-10 days of the results being back, no matter whether it is benign or malignant pathology. This is a critical systems issue, common courtesy, and a mark of your professionalism. Path follow up consists of three steps:

- Call the patient
- Record the results and the date of contact in the path book in the GI Lab
- Put a brief "Pathology Follow Up Note" in Orchid.

The Pathology Conference at OVMC is weekly review of the prior week's most interesting pathology specimens. During the week the GI Fellow is to mark (circle, check) in the Pathology Book which cases are suitable for review in Path Conference. GI fellow is responsible for bringing the pathology book to Path Conference and scribing the results.

Call Schedule: The call schedule will be determined prior to the GI fellow's rotation but will basically consist of two weeks of night call (5pm-8am) and two weekend call (5p Fri – 8 am Mon), while staying within the confines of ACGME work hour rules. In the month has five weekends, the fellow will take three weekend calls in the month. Medical house staff do not take GI call but are expected to help out every weekday with seeing the inpatient consultations – this is your opportunity to learn how to take a GI focused history & physical and help develop a management plan.

General Rules for the GI Service:

Consults:

- i) Consults should be seen the same day they are requested, assuming the consult is made before 5 pm. For consults between 5 pm – 8 am, the timing is dependent on the acuity of the case. If you aren't sure whether to go see the patient – go see the patient. Earlier is always better.
- ii) There is no separate pancreaticobiliary service at OVMC – all consults to the GI service should be seen and staffed with the GI attending. Hepatology consults may be staffed with Dr. Beaven.
- iii) Each new consult should include, on average, at least 15 minutes of teaching time with the GI attending as part of our commitment to your learning and development, consistent with the broader UCLA GI Division's guidelines for GI fellow training. This teaching time may be led by the trainee (e.g. after researching a topic) with input from the attending.
- iv) Weekend consults can be held until Monday; however, no more than 5 consults should be carried over (i.e. if 7 new consults over the weekend, the two most pressing should be staffed via phone). In addition, urgent/emergent cases should be staffed over the weekend and not carried over. If in doubt about the level of urgency, do not hesitate to contact the attending on call

Notes:

- i) After a consult is discussed and a plan formed, the GI fellow (and/or rotating medical house staff) will complete a consultation note with a clear and succinct Assessment (aka

- Impression) and Plan (aka Recommendations). Additionally, our recommendations should be directly (verbally) communicated to the consulting team as soon as possible, both as a courtesy and to avoid delays in care.
- ii) Daily notes on inpatients are not required unless there is updated information or a change of plan (e.g. “recurrent hematochezia, plan to scope tomorrow”, or “add tenofovir 300 mg PO QD”, etc, etc). For patients with prolonged inpatient stays, 1-2 daily notes per week should suffice.
 - iii) A daily note is NOT needed on the day of an endoscopic procedure as the procedure note will suffice. Only GI Fellows and Faculty write procedure notes.
 - iv) Leave a note the day AFTER a procedure. It is important to check on a patient and make sure everything is OK (e.g. hemoglobin stable, WBC downtrending, decreased abdominal distention etc.) and communicate the endoscopic findings and followup with them directly.
 - v) A clear “sign off” note should be documented once we have decided no further followup is needed (with approval of the consult attending). A good signoff note should include a clear plan for when the patient has GI followup (if indicated) – think what you would like to read/know if you were seeing this patient in clinic three weeks. This note is preferably written by the GI fellow.

KEY PHONE NUMBERS:

Prefix 818-364-xxxx (most OVMC numbers) **AND NOW 747-210-xxxx (new Cisco phones)**

Only numbers with last four numbers in form 3xxx or 4xxx can be direct dialed. For example, x4627 can be direct dialed as 364-4627, but x6186 can only be reached by calling the operator. New phone numbers / phones use 7-**** (i.e. 747-210-3230 can be dialed on a new Cisco phone in the hospital by dialing 73230)

Operator 818-364-1555

Dr. Hu 818-313-0616 (page), 747-210-3230 (office), 310-869-6698 (cell)

Dr. Beaven 818-313-0742 (page), 747-210-3688 (office), 310-795-1976 (cell),
or UCLA pager 22444 through Mednet

Dr. Tabibian 818-313-0874 (page); 747-210-3693 (office); 310-849-9488 (cell)

Ruth 818-388-9811 (cell), 661-287-5821 (home)

GI Lab 747-210-4627 (main number), 747-210-3438 (workroom), x6186, 2nd floor 2C-175

OSPA 747-210-4950 (2nd floor)

Recovery 747-210-4362 (PACU 3rd floor 3A121)

GI Consults 818-313-0429 (Consult pager)

General Surg 818-313-0776 (pager)

Anesthesia 818.529.0372 (pager for anesthesiologist of the day)
747-210-4350

DOM Fax 747-210-4573, 747-210-3205

Access Paging (Voicemail Access): #6292 → pager → call back # (**What is this?)

Pathology 747-210-4102

ED Code 911*