

Packard Intermediate Care Nursery (PICN) Rotation- Red team

Rotation Contacts and Scheduling Details

Rotation Director: Ron Cohen, MD
rscohen@stanford.edu
750 Welch Road, Suite 315
(650) 723-5711

PICN Rotation Office: Located in the PICN, 1st Floor

Positions Available: 1 junior or senior resident will be accommodated per block- electives may be 2 or 4 weeks.
Prerequisite: LPCH NICU rotation

Months Rotation Offered: every block.

Introduction

Pediatric housestaff in the Department of Pediatrics at the Stanford University School of Medicine are offered the opportunity to enrich their neonatal management training skills during the Packard Intermediate Care Nursery/Red Team (PICN-1) elective rotation. The focus of the housestaff experience is to strengthen their knowledge about the management of convalescent newborns previously cared for in the Intensive Care Nursery and their complex discharge needs. This rotation provides housestaff with the opportunity to work closely with Neonatology faculty to develop their intermediate nursery skills.

Weekly Schedule

	Monday *	Tuesday	Wednesday	Thursday	Friday
7:00 - 8:00	Pre-Round	Pre-Round	Pre-Round	Pre-Round	Pre-Round
8:00 - 8:30	Morning Report	Morning Report	Morning Report	Morning Report	Grand Rounds
8:30 - 9:00	Pre-round	Pre-round	Pre-round	Pre-round	
9:00 - 12:00	Rounds, Patient Care	Rounds, Patient Care	Rounds, Patient Care	Rounds, Patient Care	Rounds, Patient Care
Noon	Conference	Conference	Conference	Conference	Conference, Perinatal M&M Conference
13:00 – 17:00	Patient Care, Teaching	Patient Care, Teaching	Patient Care, Teaching	Patient Care, Teaching	Patient Care, Teaching

16:30	Sign-Out	Sign-Out	Sign-Out	Sign-Out	Sign-Out
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Rotation Specifics

Orientation

Residents are expected to read this rotation summary prior to the start of their rotation. Orientation will take place on the first day of the rotation, following morning report; residents are not expected to pre-round on their first day. The resident should find the attending in Attending/NNP office in the PICN, on the first floor of LPCH (PICN-1).

Resident workspace: As this is an elective, there is no dedicated workspace for the resident. Residents will work at computer stations or COWS located in the PICN-1.

Reading materials:

The NICU guide is available on the LPCH Intranet (<https://intranet.lpch.org/departments/nicu/nicuGuide/index.html>) and serves as an excellent resource tool for all aspects of newborn management. References are cited in each chapter to pursue additional reading on a subject.

Call Schedule

There are no call responsibilities or weekend duties associated with this rotation.

Pagers

Residents will be expected to be available by pager for urgent matters when at educational conferences.

Rounds

Residents will be expected to arrive no earlier than 7:00am to begin pre-rounding. The residents should attend Morning Report at 8am, and then return to the PICN-1 to finish pre-rounding on their patients. Rounds will begin at 09:00 am with the attending, nurse practitioner, and charge nurse. Residents should be prepared to present patients during rounds. The resident and attending(s) will walk-round in the nursery and will attempt to update bedside nurses and family members who are present as to the plan of care for the day.

The Attending Neonatologist will assign appropriate patients for the resident to follow, and thereafter the resident will follow the patient until discharge or until the end of the rotation, whichever comes first. Residents will assume primary care of their patients and will be expected to update the families, as well as to update the online sign-out report form.

Resident Presentation

Residents will be expected to give an informal 15-20 minute presentation during the rotation on a topic of their choice relating to major morbidities of newborns. Arrangements can be made with Attending to coordinate date/time of presentation.

Resident Roles and Responsibilities

- Assume primary care for 4-6 infants in the Intermediate Care Nursery (PICN-1)
- Pre-round on patients and write daily progress notes and orders
- Update the sign-out sheet daily
- Prepare an informal presentation to the attending during the rotation.
- If/when applicable, present patient overview at Perinatal M&M conference.

Evaluation and Feedback

House officers are encouraged to solicit feedback from the Attending at the mid-point of their rotation to discuss areas for improvement and again at the end of the rotation to gain an overall evaluation. Formal evaluations will be provided through the MedHub system.

Competency-based Goals and Objectives

Goal 1. Learn the inpatient management of the extremely preterm infant			
Resident Objectives:	Instructional Strategies	Assessment of Competence	ACGME Competency Goals
Evaluate readiness to transition from gavage to oral feeds	Patient care Clinical teaching	Direct observation Self assessment	MK
Understand the criteria for ROP screening and management of pre-threshold ROP	Patient care Clinical teaching Directed reading	Direct observation Self assessment	MK, PC
Learn the classification for severity of physiologic BPD	Patient care Clinical teaching Directed reading	Direct observation Self assessment	MK, PC
Understand the indications for transition from isolette to open crib	Patient care Clinical teaching	Direct observation Self assessment	MK, PC
Learn how to transition to discharge feeding regimen	Patient care Clinical teaching	Direct observation Self assessment	MK, PC
Understand criteria for discontinuation of caffeine therapy	Patient care Clinical teaching	Direct observation Self assessment	MK, PC
Goal 2. Learn the discharge criteria of a complex newborn			
Resident Objectives:	Instructional Strategies	Assessment of Competence	ACGME Competency Goals
Create a discharge checklist and track a patient's progress toward goals for discharge	Patient care Clinical teaching	Direct observation Self assessment	SBP, PC
Assess apnea, bradycardia, and desaturation profile of an infant as it relates to discharge readiness	Patient care Clinical teaching	Direct observation Self assessment Directed reading	MK, PC
Appreciate indications for discharge home on oxygen	Patient care Clinical teaching	Direct observation Self assessment	MK, PC, SBP
Appreciate indications for discharge with gavage feeds	Patient care Clinical teaching	Direct observation Self assessment	MK, PC, SBP
Prepare a concise yet comprehensive discharge summary	Patient care Clinical teaching	Direct observation Self assessment	MK, ICS, P
Participate in multi-disciplinary rounds	Patient care Clinical teaching	Direct observation Self assessment	ICS, SBP
Communicate with PCP, referring providers, and consultants at time of discharge	Patient care Clinical teaching	Direct observation Self assessment	ICS, P
Goal 3. Understand the follow-up requirements of a NICU graduate			
Resident Objectives:	Instructional Strategies	Assessment of Competence	ACGME Competency Goals
Learn indications and administration of Synagis	Patient care Clinical teaching Directed reading	Direct observation Self assessment	SBP, MK
Learn criteria for High Risk Infant Follow-Up	Patient care Clinical teaching Directed reading	Direct observation Self assessment	SBP, MK

PBLI = practice based learning and improvement

ICS = interpersonal and communication skills

P= professionalism

MK= medical knowledge

PC= patient care

SBP = systems based practice