

PICN Rotation - 5 Minute Curriculum

Contacts:

Rotation Director:
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Phone #s	
PICN 1	7-8080
PICN 2	7-8871
WBN	3-8772
NICU	7-8800
L&D	3-5403

Orientation

- Outgoing intern on previous block should provide orientation prior to start of rotation (this includes providing new intern with handbook, orienting to PICN1 and PICN2, Delivery and Operating Rooms)
- Brief delivery room orientation to be provided by Hospitalist on first day of rotation
- PICN 2 is located on Floor 2 between LPCH and Maternity; this is your home base
- Add PICN Blue Team to your EPIC list; as well as WBN, L&D, NICU, F1 and F2 Maternity (see below)
- Add the L+D Grease Board to your favorites in EPIC
- As with any other inpatient rotation, holidays are treated as regular work days

Team

- Intern from 7:00 AM – 5:30 PM for two weeks from Monday-Saturday
- When 2 interns are scheduled to work in the same block, one intern will work both Saturdays and the other intern will work both Sundays
- Long shift Neonatal Hospitalist 1 – here from 7:30 AM- 5:30 PM
- Short shift Neonatal Hospitalist 2 – here for 5 hours (usually ~8:30 AM – 1:30 PM)
- Hospitalist may vary daily
- Standard delivery room teams include the hospitalist, intern, NICU RN

Schedule

Time	Monday - Saturday	Saturday	* Sunday
7:00 - 8:00 AM	Sign out, pre-round, deliveries	Sign out, pre-round, deliveries	* off
8:00 - 8:30 AM	Morning report (Friday Grand Rounds 8 -9 AM)	Pre-round and deliveries	
8:30 – 9:30 AM	Pre-round and deliveries	Pre-round and deliveries	
9:30 - Noon	Rounds and deliveries	Rounds and deliveries	
Noon – 1:00 PM	Noon Conference	Patient care and deliveries	
1:00 – 4:30 PM	Patient care and deliveries	Patient care and deliveries	
4:30 – 5:30 PM	Sign out	Sign out	

* Exception: If 2 interns are scheduled to work during the same block, one intern will work both Saturdays and the other intern will work both Sundays.

Add PICN Blue Team to your Personal List

- Click Patient Lists Icon (top left corner)
- Click Available Lists (left column)-> Provider List -> Service Team
- Right-click "PICN Blue" and select "Send To" and send to your personal list
- Similarly, add the following services to your list for this rotation:
 - NICU 270
 - Maternity 192
 - Maternity 292
 - Labor & Delivery
 - ICN 1

- ICN 2
- Newborn Nursery

Morning Check-in

- After 7AM, check-in with the overnight PICN Hospitalist for any updates on new admissions or any major overnight events

Afternoon Sign out

- At 4:30 PM, sign-out to the overnight PICN Hospitalist
- How to Print Out a Sign-Out Sheet:
 - Open PICN Blue Team List
 - On top right corner, select "Print" and then "Handoff"
 - (Note: Prior to your first time printing the PICN team handoff, you may have to first click on the "write handoff" button in the tool bar toward the top left, with any patient's name highlighted. Then, on the right side where the handoff pops up, search for "Neonatology" in the search bar. Then, click on the down arrow of the print icon in the top right corner and select "Handoff")

Progress Notes

- Document daily progress notes using "Neo Progress Note" template:
- Select New Note
- Under Type, choose "Progress Notes"
- Service should be "Neonatology"
- In the Insert SmartText box, choose "NEO PROGRESS NOTE"
- If possible, try to complete progress notes on short shift Hospitalist's patients by noon

Delivery Room Notes

- Document each delivery using "Peds Team Delivery Room Note" template:
- Select New Note
- Under Type, choose "Progress Notes"
- Service should be "Neonatology"
- In the Insert SmartText box, choose "PEDIATRIC TEAM DELIVERY ROOM NOTE"
- Info from mother's chart will pull in from the OB records. This will pull in prenatal labs from maternal chart but often not everything automatically populates so you should browse through mother's H&P/notes to ensure all necessary info is obtained for delivery room note
- Describe the delivery in detail and if any resuscitation was necessary

Rounds

- Aim for 9:30 AM
- If possible, start with short shift Hospitalist's patients and discharges
- Rounds are family centered with nurses and families involved in discussion
- Be aware that rounds will likely get interrupted by deliveries
- At some point after rounds, make sure to update families daily (either at baby's bedside, or in mother's F1/F2 room if she's still inpatient, or call family if mother has already been discharged)

Deliveries

- THE BEST! PRIORITY! Attend all "Standard" deliveries even if during sign out, rounds, or morning report/noon conference
- For vaginal deliveries, wear yellow gown and gloves
- For C/S deliveries, wear a hat and mask; scrub (or use gel) at OR scrub station; will be given sterile gown and gloves in OR
- When entering room, introduce yourself ("I'm Dr. Jun, Pediatric Intern, here with the delivery room team")
- For c-sections, tell NICU RN your glove size, scrub, and then put on sterile gown and gloves (in closed glove fashion). Then, ask the scrub nurse for the sterile blanket. Keep sterile blanket folded until "Uterine Incision" called, then open blanket and be ready to receive infant from OB team
- Residents are expected to take the lead in the delivery room when appropriate (this is the best chance to get hands on experience!), with supervision and guidance provided as needed

- Before leaving, provide L&D RN with the APGAR scores and comment on any resuscitation performed
- Complete note titled “Peds Team Delivery Note” and send to Hospitalist who attended delivery. (Try to complete as soon as possible after delivery so note is in chart for other providers taking care of patient.)

Discharges

- All patients discharged (or transferred out) from the PICN need a Discharge Summary (or Transfer Summary).
- Update “Detailed Hospital Course” under Discharge Tab (found in ADT Navigators) as frequently as possible.
- Complete “Neonatal Discharge Summary” (Detailed Hospital Course will pull in)
- Update “Brief Hospital Course – For After Visit Summary” (this summary will be provided to parents)
- Ensure PMD follow up date and time. Contact PMD for verbal sign out. Make sure to record that PMD contacted (under PCP Follow Up section in ADT Navigators)
- Complete discharge prescriptions (if any) and med reconciliation
- Discharge order (found under Discharge Tab in ADT Navigators)

Admissions

- All admissions from L&D and WBN require an H&P. Use the “Neonatal Admission Note”
- Complete or review admission order set (Can use “Neonatal Admission Intermediate Care” order set for most PICN admits)

Transfers

- Transfers to the NICU or WBN (or other LPCH units) require the “Neonatal Transfer/Accept Note”
- For transfers, review and reconcile all orders
- Make sure to put in "Transfer Bed Request" order as well as "OK to Transfer" order in Epic
- Make sure to contact receiving team to give sign-out on patient

Procedures

- There may be opportunities to perform lumbar punctures, circumcisions, and intubations for meconium
- Document lumbar punctures, circumcisions, etc. in separate Procedure Note (under Procedure Note tab).
- Intubations in delivery room are included in delivery room note
- Don't forget to log these in MedHub as well

Conferences

- Try to attend Morning Report (8-8:30a) and Noon Conference (12p-1p) if/when there are no deliveries or other urgent patient care issues
- Expect to leave conference to attend deliveries
- Try to sit near door during conference – so you can leave quickly and easily when deliveries are called

Feedback/Evaluation

- Since Hospitalists may vary daily, the attendings will attempt to provide you with feedback on a regular basis during the rotation
- Proactively seek feedback on delivery room management
- Please feel free to request feedback from the attendings during the week as well as at the end of the rotation
- Complete MedHub online evaluations

Last re: Jan 2019