



Virtual Transition to Residency Course: “Intern Boot Camp”

The following is an outline of the virtual transition to residency course implemented in 2020 in response to the effects of the COVID-19 pandemic.

Course Director: Michelle Keating, DO
mkeating@wakehealth.edu

Course Coordinator: Jon Goforth, MBA
jon.goforth@wakehealth.edu

Table of Contents

Course Layout	2
Intern Boot Camp Course Requirements and Components Outline ..	3
MAT/DEA-X Waiver Training	4
Required Sessions, Modules, and Assignments	6
Elective Sessions, Modules, and Assignments	8
Specialty Track Days	12
Team-Based Learning Assignment	19
Opiate Prescribing Self-Reflection Assignment	21
Discussion Boards	22

Course Layout – as delivered through Canvas (learning management system)

IBC.MS2020

- Home
- Modules
- Announcements
- Discussions
- People
- Grades
- Echo360
- WebEx
- Files

Intern Boot Camp - MS2020

View Course Stream

View Course Calendar

Welcome to (Virtual) Intern Boot Camp!

From April 20 - May 1, you will partake in weeks 2 & 3 of the immersion course full of topics related to your Intern Year. This will be an exciting opportunity to come back together (virtually) as a group of soon-to-graduate 4th years and solidify key takeaway points from your medical school career. This course will be comprised of required and elective opportunities that will allow you to dive in for intern prep and also how it relates to your specialty.

To Do

- Acute Life Threat - Identific... 1 points | Apr 22 at 5pm |
- Tonight's Medicine Power ... Apr 23 at 10:28am |
- Check Your Understanding ... 5 points | Apr 24 at 9am |
- Check Your Understanding ... 7 points | Apr 24 at 9am |
- Module Attestation - Speci... 1 points | Apr 24 at 9am |
- Opioid Risk Assessment, M... Apr 24 at 9am |
- Specialty Populations Apr 24 at 9am |



[Course Components](#)



[DEA-X Modules](#)



[IBC Specialty Tracks](#)



[Required Sessions/Modules](#)



[Elective Sessions/Modules](#)



[Course Resources](#)

Intern Boot Camp Course Requirements and Components Outline

<p style="text-align: center;">Individualized Learning Plan (ILP)</p> <p>You will create goals for what you want to take away from the curriculum prior to IBC starting, have a check-in on those goals midway through IBC, and evaluate if you achieved your goals at the end of IBC. As an adult learner, you are responsible for what you want/need to learn. Developing these skills will be crucial for your intern year as well as your career in medicine.</p> <p>This assignment will be sent via RedCap to your email.</p>	<p style="text-align: center;">Required Sessions</p> <p>These will be a mix of live, asynchronous pre-recorded, or modules and cover a variety of topics.</p> <p>Live sessions will have a WebEx link and will need to be joined in person. The times for these sessions are Eastern Standard Time (EST), so please plan accordingly.</p> <p>Other required items each have due dates associated with them.</p>	<p style="text-align: center;">Elective Sessions</p> <p>These will be a mix of live, asynchronous pre-recorded, or modules and cover a variety of topics.</p> <p>Live sessions will have a WebEx link and will need to be joined in person. The times for these sessions are Eastern Standard Time (EST), so please plan accordingly.</p> <p>You will be expected to complete a minimum of 20 electives. All electives will be due Fri. 5/1 at 9am EST</p>
<p style="text-align: center;">Record Completion of Items</p> <p>You will submit 1 take-home point for each item - elective or required - (reflection solidifies learning) and rate the session for helpfulness in preparing you for day 1 of intern year. You can also submit comments on the session (good or bad). Comments are NOT required- it would just be helpful so we can make adjustments for future iterations of this course!</p>	<p style="text-align: center;">DEA-X Training</p> <p>As the DEA-X training modules have always been asynchronous, there will be no change to these. Please continue to follow the due dates assigned for these modules.</p> <p>You may access the remaining due DEA-X modules here: DEA-X Modules</p>	<p style="text-align: center;">Team-Based Learning Project</p> <p>You have been broken up into small groups based on the specialty you matched into. You will work with your group to complete a team-based assignment about opiate prescribing in your specialty. You can view all details regarding the assignment here: Team Based Learning Project</p>
<p style="text-align: center;">Self Reflection</p> <p>After you have completed your DEA-X training and your team-based learning assignment, we ask you to write a 1-page reflection on what you envision your future opiate prescribing practices may look like.</p> <p>You can view all details regarding the assignment here: Opiate Prescribing Self Reflection</p>	<p style="text-align: center;">Discussion Boards</p> <p>If you participate on these, you will receive credit for an elective. These discussion boards will be covering four topics: 1) Useful medical apps 2) Useful medical podcasts, 3) Medical Websites for Self-Directed Learning, and 4) General Resources for intern year. We will have general and specialty-specific threads. Our goal for this is for you all to share all the useful resources you have garnered over the past few years that could assist your fellow colleagues on day 1 of intern year (and really intern year in general!)</p>	<p style="text-align: center;">Specialty Track_Days</p> <p>Specialty days will still occur in which you will be interacting with the residents/faculty/peers. Each specialty track has chosen different manners for doing this- but most will require you to be live-streamed in as most groups are small enough to facilitate discussion. The 7 tracks are: Internal Medicine, Family Medicine, Emergency Medicine, Surgery, Pediatrics, Psychiatry, and OBGYN.</p>

MAT/DEA-X Waiver Training



Faculty Implementation Guide

“Practical Skills for Serious Opioid Problems:
Meeting the DEA Waiver Requirements”

Medical Trainee Education Course on
Prevention, Identification, Treatment, Management and
Recovery in Patients with Opioid Use Disorder

Collaborating Organizations:

North Carolina Governor's Institute
American Academy of Addiction Psychiatry
Coalition on Physician Education in Substance Use Disorders (COPE)

Lead Author:

Jenifer Van Deusen, M.Ed.
Executive Director, COPE

Funding for this initiative was made possible (in part) by SAMHSA grant no. 6H77T000016. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Vision

To ensure that graduating medical trainees develop the knowledge, attitudes and skill sets vital to the transformation of medical practice that embraces evidence-based, compassionate care for persons with opioid use disorder within the context of a "community and systems perspective."⁵

Core Outcomes

Upon graduating from a health professional school utilizing this curriculum every medical trainee will demonstrate achievement of the requisite Core Outcomes vital to transforming care of patients with opioid use disorder and the system in which care is provided. As a result of this training course, every medical trainee will be able to:

1. Analyze the conditions that led to the opioid epidemic and its local and national manifestations.
2. Frame addiction and Opioid Use Disorder (OUD) as a chronic disease and recommend how that stance is foundational to prevention, treatment and recovery.
3. Illustrate the relationship between stigma and addiction and the role that language plays in it.
4. Address the role that prescribers play in prevention of OUD through rational opioid prescribing.
5. Critique the relative merits of the types and kinds of pharmacologic and behavioral treatment of moderate to severe OUD based on different patient populations.
6. Anticipate how clinical practice may evolve to support comprehensive, compassionate care of patients with OUD.

Course Outline

The course is designed to meet the criteria set by the Drug Addiction Treatment Act of 2000 (DATA 2000), in which physicians are required to complete an eight-hour training to qualify for a waiver to prescribe and dispense buprenorphine. The course contains seven Modules and five Webinars which address these topics:

- Module 1: Overview
- Module 2: Neurobiology
- Module 3: Pharmacology
- Module 4: Patient Evaluation
- Module 5: Specialty Populations
- Module 6: Clinical Practice
- Module 7: Evidence-Based Counseling
- Webinar 1: Understanding Substance Use Disorders
- Webinar 2: Basics of Chronic Pain and Chronic Pain Evaluation
- Webinar 3: Basic Tenets of Pain Treatment
- Webinar 4: Opioid Risk Assessment, Mitigation, and Management
- Webinar 5: Motivation Enhancement Techniques: Working with Patients with SUDs

Assessment for Learning

⁵ The Arizona Pain and Addiction Curriculum, Arizona Department of Health Services. June 2018.

Required Sessions, Modules, and Assignments

Each external module has hyperlinks to the resource. Students were expected to complete each item / attend each session listed.

Required Live WebEx Sessions

At the conclusion of the sessions below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness. This is not required for the virtual welcome, check-in, or closing. **Below are the times you are required and expected to log-in live.**

- Intern Boot Camp Virtual Welcome - Mon. 4/20 @11am EST
- Informed Consent Workshop w/MAPS groups (see description)- Mon. 4/20 @1:30pm or 3:30pm EST
- Acute Life Threat - Identification & Stabilization w/Dr. Jason Stopyra - Wed. 4/22 @2pm EST
- Approach to Psychiatric Emergencies w/Dr. Sahil Munjal - Wed. 4/22 @3pm EST
- Approach to Altered Mental Status w/Dr. Pat Reynolds - Thu. 4/23 @1pm EST
- Week One Virtual Check-In & Gift Card Giveaway - Fri. 4/24 @11am
- Caring for the Pregnant Patient w/Dr. April Miller - Fri. 4/24 @1pm EST
- Responsible Prescribing - How, when, & when not to prescribe w/Drs. David Miller & Karen Gerancher - Mon. 4/27 @ 9:40am EST
- Safe and Practical Opioid Management w/Dr. Buddy Marterre - Mon. 4/27 @1pm EST
- Words of Wisdom: Intern Boot Camp Wrap-up & Final Gift Card Drawings - Fri. 5/1 @ 11:30am EST

Required Assignments

- Opiate Prescribing Self-Reflection - due 4/30 @ 11:59pm
- Team Based Learning Project - due 4/30 @ 11:59pm

Asynchronous Recorded Sessions - due 5/1 @ 9am

At the conclusion of watching each session below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness.

- [The Art of the Consult](#) w/Dr. Matt Miles
- [The Discharge Summary - More than just another note](#) w/Dr. Michelle Keating
- [Intern as Teacher](#) w/Dr. Michelle Keating
- [Lessons Learned from the Other Side of Medicine](#) w/Drs. Deon and Carmen Strickland (Podcast)
- [Lines and Tubes on Imaging](#) by Dr. Kevin Hiatt
- [Over the Counter Medications - Tips for Clinical Practice & Beyond](#) w/Drs. Hugh & Elissa Dowlen
- [Pandemic Planning & Response](#) w/Dr. Richard Lord
- [Patient & Provider at Odds](#) w/Dr. Lindsay Strowd
- [Team Members on Day 1 - OT, PT, & ST...Oh My!](#)

Required Modules - due 5/1 @ 9am

At the completion of each module below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness.

- [Patient Confidentiality: Three things that you cannot forget](#) (Module)
- [Physician Well-Being: Protect Against Burnout and Encourage Self-Care](#) (Module)
- [Telemedicine: A Practical Guide for Incorporation into your Practice](#) (Module)
- [WISE-OnCall Death Certification](#) (Module)

Elective Sessions, Modules, and Assignments

Students were expected to complete at minimum 20 elective items based on their preferences for internship preparation.

Live WebEx Sessions

At the conclusion of the sessions you attend below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness.

- Advanced Directives Workshop w/Dr. Michelle Nicolle - W. 4/22 @ 11am EST
- Power Couples in Medicine w/Panel of Couples who both are Physicians - Th. 4/23 @ 5pm EST
- Approach to Hyperglycemia, Hypoglycemia, and DKA w/Dr. Kristen Hairston - Fri. 4/24 @ 2pm
- COVID-19 Update Q&A Session w/Drs. Richard & Pat Lord - Mon. 4/27 @ 5pm EST
- ACLS Walkthrough w/Dr. Meagan Hunt - Wed. 4/29 @ 10am EST
- Approach to Pediatric Fluids w/Dr. Jennifer Jackson - Wed. 4/29 @ 11am EST
- Common Adult Lab Tests Every Intern Needs w/Dr. Leslie Ellis - W. 4/29 @ 1pm EST
- How to Approach Bleeding in the Pediatric Patient w/Dr. Thomas Russell - W. 4/29 @ 2pm EST
- Chronic Pain Management for the Rising Intern w/Dr. Amber Brooks - W. 4/29 @ 3pm EST
- Surgical Wound Care w/Dr. Greg Waters - Wed. 4/29 @ 4pm EST
- Approach to Acute Kidney Injury w/Dr. Isai Bowline - Thu. 4/30 @ 4pm EST
- Suturing Materials Workshop w/Drs. Browne & Siska - Fri. 5/1 @ 9am EST

Survey Opportunities

We have opportunities to complete brief surveys for elective credit. Each survey should take no more than 5-10 minutes max. These surveys will be sent to your email via RedCap. Once complete, you will receive elective credit.

- Year 4 Finish Line Survey - Released 4/21 @ 12pm, due 5/1 @ 9:00 am
- Health Equity Curriculum Survey - Released 4/23 @ 12pm, due 5/1 @ 9:00 am (all who complete will receive an e-gift card)

Discussion Boards

If you participate on these, you will receive credit for an elective. These discussion boards will be covering four topics: 1) Useful medical apps 2) Useful medical podcasts, 3) Medical Websites for Self-Directed Learning, and 4) General Resources for intern year. We will have general and specialty-specific threads. Our goal for this is for you all to share all the useful apps, websites, podcasts, and documents/PDFs you have garnered over the past few years that could assist your fellow colleagues on day 1 of intern year (and really intern year in general!)

- [General Resources for Intern Year](#)
- [Amazing Apps for Intern Year!](#)
- [Medical Podcasts You Can't Live Without!](#)
- [Medical Websites that Keep You Coming Back!](#)

Asynchronous Recorded Sessions - due 5/1 @ 9am

At the conclusion of watching each session below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness.

- [Addiction Counseling w/Addiction Research & Clinical Health \(ARCH\) Team](#)
- [Approach to Inpatient Acute Pain Management w/Dr. Chris Edwards](#)
- [Approach to Mechanical Ventilation w/Dr. Drew MacGregor](#)
- [Approach to Neurologic Imaging w/Dr. Carol Geer](#)
- [Critical Topics in Inpatient GI Management w/Dr. Joel Bruggen](#)
- [Death Certification & Autopsies w/Dr. Nathan Shaller](#)
- [Herbs and Drugs w/Dr. Richard Lord](#)
- [Hypoxemia - Keeping Your Head Above Water w/Dr. Drew MacGregor](#)
- [ID Primer on Urgencies and Emergencies for the Non-Internist w/Dr. Jim Peacock](#)
- [Integrative Medicine - What it is & incorporating it in your practice w/Dr. Remy Coeytaux](#)
- [Pacemakers in the ICU w/Dr. Drew MacGregor](#)
- [Pediatric Infectious Diseases for Docs and Parents w/Dr. Larry Givner](#)
- [Pharmacy Clinical Pearls w/Kate Summers, PharmD](#)
- [Psychiatry 101 for the Intern w/Dr. Heather Douglas](#)
- [Radiology Survival Skills for the Intern w/Dr. Kevin Hiatt](#)
- [Rheumatology for the Intern w/Dr. Jon Golenbiewski](#)

Elective Modules - due 5/1 @ 9am

At the completion of each module below, you will be expected to provide at least one take-home point of something you learned from the session as well as providing input whether the session increased your internship preparedness.

- [AAP Webinar: Helping Practices Prepare for Disaster](#)
- [Acute Renal Failure: What you need to know](#) (Module)
- [Acute Vision Loss: What you cannot afford to miss](#) (Module)
- [Advanced Care Planning Course - The Conversation Starter Kit](#) (Module)
- [Anemia: What you need to know](#) (Module)
- [Annual Prescription Renewal: Save Time and Improve Medication Adherence](#) (Module)
- [Antibiotics Review](#) (Module)
- [Chest Pain: What you cannot afford to miss](#) (Module)
- [Common Presentations of Pediatric Acute Respiratory Distress](#) (Module)
- [Critical Care for the Non-ICU Physician](#) (Module)
- [Crying Baby: What you need to know](#) (Module)
- [Delirium: What you need to know](#) (Module)
- [Diplopia: Two causes you can't afford to miss](#) (Module)
- [EKG Skills Work-through](#) (Module)
- [Empathetic Listening: Improve the patient experience by honoring the first golden moments to understand patients' needs and values](#) (Module)
- [Eye Redness: Things you cannot afford to miss](#) (Module)
- [Fever in a Neonate or Child: What you need to know](#) (Module)
- [Fluids Tutorial](#) (Module)
- [Harvard's COVID-19 Student Response Curriculum](#) (Module)
- [Learn Derm - Dermatology Modules](#)
- [Medication Adherence: Improve Patient Outcomes and Reduce Costs](#) (Module)
- [Neonatal Distress: What you need to know](#) (Module)
- [Palliative Care- Dying with Dignity: What you need to know](#) (Module)
- [Pediatric Radiology Cases](#) (Module)
- [Physician Suicide and Support: Identify At-Risk Physicians and Facilitate Access to Appropriate Care](#) (Module)
- [Ruling Out Secondary Headache: SNOOP It!](#) (Module)
- [SCOPE of Pain - A Patient-Centered Approach to Opioid Tapering](#) (Module)
- [SCOPE of Pain - Opioid Prescribing for Providers Working with Veterans and Military Service Personnel](#) (Module)
- [SCOPE of Pain - Overdose Prevention and Naloxone Rescue Kits for Prescribers and Pharmacists](#) (Module)
- [SCOPE of Pain - Safer Opioid Prescribing for Adolescents](#) (Module)
- [SCOPE of Pain - Safer Opioid Prescribing in the Emergency Department](#) (Module)
- [SCOPE of Pain - Safer Post-Operative Prescribing of Opioids](#) (Module)

- [Splinting Instructional Videos: Volar Wrist Splint Technique, Boxer Splint Technique, Thumb Spica Splint Technique, Sugar Tong Splint Technique, Posterior Ankle Splint Technique with Hourglass Fold, Ankle Stirrup Splint Technique, U&L Splint Technique](#)
- [Suicidal Behavior: What you need to know](#) (Module)
- [Touch Surgery](#) (Simulation of at least)
- [Trans 101: Transgender People in Everyday Work and Life!](#) (Module)
- [Weakness, Paralysis, Paresis, And/Or Loss of Motion: What you cannot afford to miss](#) (Module)
- [Wisconsin Case Modules](#) (6 Cases: [Handovers](#), [GI Bleeding](#), [AMS](#), [Hyperglycemia/Hypoglycemia Part A](#), [Hyperglycemia/Hypoglycemia Part B](#), [Tachypnea/Hypoxemia](#), [Fever](#))
- [Wise-OnCall Modules](#) - 12 different modules for elective – all options except Death Certification (required) and Documentation

Specialty Track Days

Students self-selected their specialty track based on which most closely matches their internship out of Psychiatry, Surgery, Family Medicine, Emergency Medicine, Internal Medicine, OBGYN, and Pediatrics. During the specialty track day, students participated in interactive conferences (via WebEx or GoToMeeting) with faculty in their specialty for didactic and interactive sessions. See below for specialty day itineraries.

Psychiatry Specialty Track Day

Tuesday, April 21st, 2020

Leader: Heather Douglas, MD

Location: WebEx

Time (all times are EST)	Topic	Speaker
8:30-9:00am	A Word from Our Program	Steve Scoggin
9:00-10:00am	Hold that Pager w/our Chief	Margaret Cinderella
10:00-10:30am	Neuromodulation	Heather Douglas
10:30-11:00am	MAT	Dean Melton
11:00am-12:00pm	Consults, Medical Student Teaching, Adult Emergency	Sahil Munjal
12:00-1:00pm	<i>Break for Lunch</i>	
1:00-2:00pm	Child Emergency Dept & Inpatient	Matt Hough
2:00-2:30pm	Neurobehavioral & Geri	Karen Green
2:30-3:00pm	Women's Clinic	Katherine Atala
3:00-4:00pm	Telepsych & Inpatient	Richard Blanks

Surgery Specialty Track Day

Tuesday, April 28th, 2020

Leader: Greg Waters, MD

Location: WebEx

Time (all times are EST)	Topic	Speaker
8:50-9:00am	Surgery Day Kick-Off	Greg Waters, MD
9:00-10:00am	Surgical Sepsis	Andrew Nunn, MD
10:00-11:00am	Surgical Shock	Matthew Painter, MD
11:00am-12:00pm	Surgical Professionalism	Reese Randle, MD
12:00-1:00pm	Intern Panel - Common Intern Challenges	Interns
1:00-2:00pm	Lines, Tubes, and Drains in Surgery	John Petty, MD
2:00-3:00pm	Hold that Page & Delivering BAD News	Greg Waters, MD
3:00-4:00pm	Pick Your Trauma	Greg Waters, MD & Jonathan Zurcher, MD

Emergency Medicine Specialty Track Day

Tuesday, April 28th, 2020

Leader: Nick Hartman, MD

Location: GoToMeeting

Time (all times are EST)	Topic	Speaker
9:00-9:30am	Clinical Decision Rules to Know	Kim Askew
9:30-10:00am	Charting Tips	Kathleen Hosmer
10:00-10:30am	Sign-Out/Transitions of Care	Kathleen Hosmer
10:30-11:45am	Round Table Discussion - Life in EM	Panel (<i>Masneri, Hannum, Pariyadath, Manthey, Chiefs</i>)
12:00-12:30pm	Meeting/Lunch w/Program Directors (Q&A)	Cedric Lefebvre
12:30-1:00pm	Calling Consults	Cedric Lefebvre
1:15-2:00pm	What do I do when...? Dealing with nursing concerns	Nick Hartman/Chief(s)
2:00-3:00pm	Ultrasound (tentative)	Glass, et al

Family Medicine Specialty Track Day

Tuesday, April 28th, 2020

Leader: Jennifer Roper, MD

Location: WebEx

<u>Time</u> (all times are EST)	<u>Topic</u>	<u>Speaker</u>
8:30-8:40am	Welcome & Survival Tips	Jennifer Roper
8:40-9:40am	Intro to Health Maintenance Visits	Sarah Cartwright
9:40-9:45am	<i>Break</i>	
9:45-10:30am	AKI/Acute Renal Failure	Holly Hoey
10:30-11:15am	EKG Review	Maggie Hansell
11:15am-12:00pm	Hold that Page	Alicia Firestone & Daniel Binder
12:00-12:30pm	<i>Break for Lunch</i>	
12:30-1:15pm	Pediatric Pearls	Travis Larson & MaryElleny McGregor
1:15-2:00pm	Intro to InBasket Responsibilities	Michelle Keating
2:00-2:10pm	<i>Break</i>	
2:10-3:00pm	Acute Presentations in Clinic	Michelle Keating
3:00-3:45pm	OB Pearls	Claudia Tussey

Internal Medicine Specialty Track Day

Thursday, April 30th, 2020

Leader: Joey Cristiano, MD

Location: WebEx

Time (all times are EST)	Topic	Speaker
8:30-9:00am	Day 1 Introduction/Tech Check	Joey Cristiano
9:00-9:45am	Recognizing Sick Patients as the Intern	Joey Cristiano & Charles Semlka
9:50-10:20am	The Reflex Arc: Top 10 Tips	Nathan Roberts & Rachel Wilson
10:20-10:35am	<i>Break</i>	
10:35-11:05am	Nuts & Bolts: Admissions and Discharge Logistics	Safoa Addo & Joey Cristiano
11:10-11:45am	Panel Discussion: What to Expect Day One	Maryam Famouri, Charles Semelka, Leah Snipes, and Joey Cristiano
11:50am-12:35pm	<i>Break for Lunch</i>	
12:35-1:05pm	Q/A with IM Program Director	Karl Richardson
1:05-1:45pm	Handoffs and the Pager	Christina Rinaldi & Joey Cristiano
1:50-2:15pm	COVID and Being an Intern	TBD/ACM

OBGYN Specialty Track Day

Thursday, April 30th, 2020

Leader: Laura Rankin, MD

Location: WebEx

Time (all times are EST)	Topic	Speaker
8:30-9:30am	Signing out, presenting to the attending, answering pages & triage survival tips	Sarah Allen
9:45-10:00am	Colposcopy	Laura Rankin
10:00-10:15am	Local anesthesia & punch biopsy	Laura Rankin
10:15-10:30am	<i>Break</i>	Laura Rankin
10:30-10:45am	Cervical exam	Laura Rankin
10:45-11:00am	Vaginal delivery	Laura Rankin
11:00-11:15am	Vaginal suturing	Laura Rankin
11:15-11:30am	Postpartum hemorrhage	Laura Rankin
11:30-11:45am	Eclampsia	Laura Rankin
11:45am-12:00pm	Maternal cardiac arrest	Laura Rankin

Pediatrics Specialty Track Day

Thursday, April 30th, 2020

Leader: Elizabeth Halvorson, MD

Location: WebEx

Time (all times are EST)	Topic	Speaker
8:30-9:30am	Surviving & Thriving on Wards	Elizabeth Halvorson
9:30-10:15am	Life & Care of a Medically Complex Child	Jamie Skaar + special guest
10:15-10:30am	<i>Break</i>	
10:30-11:15am	Never Trust a Newborn!	Megyn Sebesta
11:15am-12:00pm	Hold that Pager!	Madison Nation & Kaela Yates
12:00-12:15pm	<i>Break</i>	
12:15-1:00pm	Nutrition Cases	Leila DeWitt

Team-Based Learning Assignment

Below you will find the outlined instructions provided to students for this required component.

In light of having to move Intern Boot Camp virtually, we recognize there are challenges to ensure we are providing sessions to assist in gaining knowledge, skills, and behaviors to prepare you for Day 1 of intern year.

However, we are also given a great opportunity to be creative. One of the most crucial skills of intern year will be your ability to work as a team. You and your fellow interns of your program may not always share the same physical space, but will need to remain connected as a team. The social distancing because of COVID-19 in some ways mimics what you may experience in your residency with your fellow interns being spread out on different rotations. A secondary goal for this project is to assist in maintaining social contact in difficult times: COVID-19 or internship in general.

In order to address team-based learning for Day 1 of intern year, honor the unique intern challenges for each of your specialties, and promote one of the most crucial skills of adult learning which is self-directed learning, we expect each of you to help each other prepare for Day 1 of intern year.

You will be placed in teams of 4-8 based on the specialties in which you have matched. As a team, you will work together to complete an evidence-based handout or presentation on "unique considerations of opiate prescribing in your specialty."

We would recommend assigning roles, holding each other accountable, and schedule regular meetings to discuss virtually.

Roles include:

- **Scheduler:** coordinates and schedules Zoom/WebEx/FaceTime/Skype and hosts all virtual meetings
- **Recorder:** takes notes and sends summary to the group
- **Editor:** edit all documents for grammar, ensure the document has no repetition, and makes sure the literature cited is in the correct AMA format
- **Reflector or Strategy Analyst:** observes team dynamics and guides the consensus-building process (helps group members come to a common conclusion)

- **Critic/Skeptic:** Pushes back when the team comes to consensus too quickly, without considering a number of options or points of view. The questioner makes sure that the group hears varied points of view, and that the group is not avoiding potentially rich areas of disagreement.
- **Encourager:** encourages group members to continue to think through their approaches and ideas. The Encourager uses probing questions to help facilitate deeper thinking, and group-wide consideration of ideas.
- **Graphic Designer/Art Director:** In charge of the slide design or design of the handout

A requirement for this project will be that you interview, as a group, at least one faculty member in your specialty to garner a front-line view of what opiate prescribing may look like in your future practice (we would recommend trying to interview a few but recognize limitations with the current situation)

Obstetrics and Gynecology & OPIOID MEDICATIONS: Prescribing considerations for new clinicians

Obstetrics and Opioid Use
Screening for opioid use should be done at the first prenatal visit using a validated screening tool.

Avoid starting opioids in pregnant patients for patients already using opioids; the goal is maintenance. It is preferable to maintain opioid use rather than avoid which risks both maternal and fetal withdrawal. Patients may need additional social support to ensure adequate prenatal care and to reduce the risk of relapse.

For pregnant women with opioid use disorder, opioid agonist pharmacotherapy is recommended.

Pediatrics should be considered and infants should be monitored after delivery for SSAS.

Evidence suggests that 1 in 200 opioid-naïve patients exposed to opioids during pregnancy will become dependent users. It is generally best to address a diagnosis and multimodal approach to pain (2).

Vaginal Birth
Non-pharmacologic measures (e.g., acupuncture, massage, and physical therapy) are preferred for pain relief. If pharmacologic analgesia is needed, NSAIDs are preferred. If needed, low-dose IV morphine or fentanyl can be prescribed. Avoid high-dose opioids. Avoid benzodiazepines that increase the risk of respiratory depression.

Breastfeeding Considerations
Avoid breastfeeding if the mother is on opioids. If the mother is on opioids, avoid breastfeeding for 24 hours after the last dose. If the mother is on opioids, avoid breastfeeding for 24 hours after the last dose.

General GYN Conditions
Many psychological conditions are related to pregnancy, and pain management is a key component of care. Consider non-pharmacologic measures and low-dose opioids. Avoid high-dose opioids. Avoid benzodiazepines. Consider SNRIs, gabapentin, and pregabalin.

Red Flag Behaviors?
"Calling your endocrinologist for an opioid refill. If you're asking me, then something somewhere has gone very wrong."

NON-OPIOID ANALGESIC STRATEGIES for endocrine-related pain

- MSK pain: **Grave's Disease or Cushing's "detox"**
 - 3-5 days of high dose NSAIDs (oral/topical)
 - Tylenol if renally impaired
- Neuropathic pain: **diabetes**
 - Try to avoid gabapentin due to sedation
 - Consider SNRIs, Cospalmin can work wonders!

"If a woman wants pain medication for chronic pelvic pain, NOT the answer. Pelvic physical therapy is the answer."
-Dr. SJ Witsberger

An Opioid Primer for the Internal Medicine Intern

FEATURING: DR. CYNTHIA BURNS

The American Opioid Crisis | The History
In the 1990s, pharmaceutical companies reassured the medical community that patients would not become addicted to opioid pain relievers; thus, providers began to prescribe them at increasing rates. After all, pain was the "5th vital sign."

Increased prescribing led to widespread misuse of both prescription and non-prescription opioids before it became clear that these medications were, indeed, highly addictive.

The total number of prescriptions dispensed in the US peaked in 2012 at more than 255 million. While the overall national opioid prescribing rate declined from 2012 to 2018, prescribing rates continue to remain overall very high.

Dr. Burns, Endocrinologist | The Interview
As an endocrinologist, Dr. Burns admits that she doesn't routinely manage patients' chronic pain medications. Despite this disclaimer, she shared valuable clinical pearls.

COMBATTING THE STIGMA OF O.U.D.
Patients usually know they have a problem, even if they don't know how to define it. Legitimize their struggle as a medical disorder and offer treatment.

Best Practice: Use a matter-of-fact tone & plain language. The more comfortable you appear talking about it, the more comfortable the patient will be.

Avoid words like "clean," "sober," and "addict."

WHAT TO DO IF YOU INHERIT A PATIENT ON CHRONIC OPIOIDS (+/- BENZOS) FOR PAIN
Always ask when you see an opioid or benzo on a patient's med list. But remember that the typical PCP visit includes...

- DIABETES
- HYPERTENSION
- HYPERLIPIDEMIA
- SOCIAL CONCERNS

You likely can't address everything in one visit, especially the first time you meet them. Take the time to build up trust before addressing chronic substance use.

Best Practice: Refer them to pain/psych for management. "It takes a village."

Note: To avoid withdrawal, you can refill the scripts until those appointments, just lay out clear boundaries.

INPATIENT CARE: THE THREE DAY RULE

3
In a typical, 3-day inpatient stay, you're probably not going to precipitate a new opioid addiction and, likewise, you should not try to detox the patient.

Remember that the threats of leaving AMA and complaints are usually out of fear of withdrawal. Start by asking:

"Tell me what it takes to prevent you from withdrawing."

Best Practice: If they have OUD, start with their home dose and then escalate with non-opioid modalities. Never send a previously opioid-naïve patient home with a new prescription.

Opiate Prescribing Self-Reflection Assignment

Below you will find the outlined instructions provided to students for this required component.

Throughout your Intern Boot Camp, you have completed DEA-X training, received dedicated lectures on opiate prescribing, and worked on a team-based project to better understand opiate prescribing considerations in your own subspecialty. Most of you have had experience with opiate use or addiction in your clinical rotations.

As reflection is another crucial adult learning tool, we challenge you to reflect on your experiences in your clinical rotations and the knowledge you have gained from the DEA-X training and your team-based learning project.

Please write a 1-page reflection on how you envision opiate prescribing may look for you in your own future practice based on what you have learned. **Submit this to Canvas by Thursday, April 30th at 11:59 PM.**

Discussion Boards

All Search by title or author... + Discussion

Pinned Discussions		Discussions		Ordered by Recent Activity
	Course Resources Last post at May 1 at 1:07am	18	42	Due May 1 at 9am
	Medical Websites that Keep You Coming Back! Last post at May 1 at 11:21am	51	58	Due May 1 at 9am
	Medical Podcasts You Can't Live Without! Last post at May 1 at 11:18am	45	56	Due May 1 at 9am
	Amazing Apps for Intern Year! Last post at May 1 at 12:22am	56	71	Due May 1 at 9am

This is a graded discussion: 1 point possible due May 1 at 9am

Medical Websites that Keep You Coming Back! Apr 16 at 1:43pm

Jon Goforth

Our goal with this discussion board is for you all to help each other out and share your knowledge of medical websites that may assist you on Day 1 of Intern Year.

When you post, try to keep the same specialities in one thread for ease of review for other students.

If you post, you will receive credit for 1 elective session.

Search entries or author Unread

This is a graded discussion: 1 point possible due May 1 at 9am

Medical Podcasts You Can't Live Without! Apr 16 at 1:42pm

Michelle Keating

Our goal with this discussion board is for you all to help each other out and share your knowledge of podcasts that may help solidify knowledge, keep you up-to-date, and may assist you on Day 1 of Intern Year.

When you post, try to keep the same specialities in one thread for ease of review for other students.

If you post, you will receive credit for 1 elective session.

author Unread

This is a graded discussion: 1 point possible due May 1 at 9am

Amazing Apps for Intern Year! Apr 16 at 1:42pm

Michelle Keating

Our goal with this discussion board is for you all to help each other out and share your knowledge of applications for your phone or tablet that may assist you on Day 1 of Intern Year.

When you post, try to keep the same specialities in one thread for ease of review for other students.

If you post, you will receive credit for 1 elective session.

This topic was edited by Jon Goforth

Search entries or author Unread



Table of contents

I. Section I: Specialty.....	3
i. Anesthesiology.....	4
ii. Cardiology.....	5
iii. Dermatology.....	6
iv. Emergency medicine.....	7-9
v. Ear, nose, and throat (ENT).....	10
vi. Family medicine.....	11-12
vii. Internal medicine.....	13-14
viii. Neurology.....	15
ix. OB/GYN.....	16
x. Ophthalmology.....	17
xi. Orthopedics.....	18
xii. Pediatrics.....	19-20
xiii. Psychiatry.....	21
xiv. Radiology.....	22
xv. Surgery.....	23
xvi. Urology.....	24
II. Section II: Topic.....	25
i. Anatomy.....	26
ii. Calculators.....	27
iii. Case based learnings.....	28
iv. Critical care.....	29
v. Financial.....	30
vi. General and for everyone.....	31-32
vii. Geriatrics.....	33
viii. Infectious diseases, immunology, and vaccines.....	34
ix. Journals, databases, search engines.....	35
x. Learning Languages.....	36
xi. Medical History.....	37
xii. News.....	38
xiii. Oncology.....	39
xiv. Pharmacology.....	40
xv. Procedures.....	41
xvi. Public health.....	42
xvii. Wellness.....	43

2

Anesthesiology

WEBSITES

- Open anesthesia
 - UVA faculty and residents with quick references for anesthesia and anesthesia subspecialties, self-study session. Podcasts episodes as well.
 - <http://www.openanesthesia.org/>
 - Self-study is \$239 for 12 months, \$199 for 6 months.

PODCASTS

- ACCRAC (Anesthesia/Critical Care Reviews and Commentary)
 - Anesthesiology from Hopkins discusses topics in anesthesia and board questions/topics. Topics get more complex and subspecialized as the podcasts goes on.
- From the Head of the Bed
 - Interviewed based style with experts from the field discussing various topics. New episodes each week.
- Depth of Anesthesia
 - Critically explores the principles behind anesthesia including physiology, ventilation, and other anesthesia topics
- Dominating the vent
 - Short video podcast series about the ventilator
 - <https://emcrit.org/emcrit/vent-part-1/>

APPS

- CDC Opioid Guideline App
 - Great app to use to quickly convert opioid μ g to Morphine Milligram Equivalents (MME) for safer prescribing practices.
- Airway Ex
 - simulates different kinds of intubations or airway procedures for you to perform on your phone. It has many different levels and various cases to choose from. Its free, and a good way to review airway anatomy and perform pretty realistic airway procedures

Pharmacology

WEBSITES

- Tox and Hound
 - Articles that go deeper into the topics of pharmacology that are clinically relevant
 - Well known on their tramadol piece - <https://emcrit.org/toxhound/tramadont/>
 - <https://emcrit.org/category/toxhound/>
- Micromedex solutions
 - one stop shop for pharm information, dosages, dose adjustments, indications, contraindications, interactions, side effects, brand names, formulations, etc.
 - <https://www.micromedexsolutions.com/home/dispatch/ssl/true>
- Deprescribing.org
 - Helpful website to guide deprescribing principles. Also, an app ("IAM medical guidelines")
 - <https://deprescribing.org>

PODCASTS

APPS

- Sanford Guide – Antimicrobial
 - Free guide for antimicrobials with summaries on drugs
- Lexicomp
 - Basically, Micromedex but Lexicomp version. UpToDate uses Lexicomp for its drug material
- CDC opioid guideline app
 - Quick links on prescribing, calculating MME
- Good Rx
 - Prescription savings
 - Patients can also access. Must have dosage and quantity correct to be able to use the coupon at the pharmacy
- Micromedex
- CredentiaMeds
 - Drug-drug interactions
- Sanford Guide – Antimicrobial
 - Free guide for antimicrobials with summaries on drugs
- EMRA
 - Quick antibiotics reference options for infections
 - Subscription required
- Epocrates
- About Herbs
 - Memorial Sloan Kettering Cancer Center's guide to botanicals, supplements, complementary therapies, and more
- Repro Tox
 - Great to check effects of medications on reproduction
- IAM medical guidelines
 - Deprescribing app

40