Final Report

EXTERNSHIP AT THE BROOKLYN HOSPITAL CENTER

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Acknowledgements

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INTRODUCTION

AMHE in association with SIMACT, are two non profit organizations, comprise mainly of Haitian Doctors, have many objectives for the Haitian Community in the United States as well as resident in Haiti. One of their objectives is to “contribute to the advancement of medicine and the betterment of public health in Haiti”. AMHE runs an Externship program at The Brooklyn Hospital Center, which is located in Brooklyn, New York. The program offers Haitian Residents from many Medical Residency programs throughout Haiti (HUEH, HUJ, HUM) a unique and insightful opportunity to obtain hands on experience in various fields of medicine.

The Brooklyn Hospital Center (TBHC) is a community hospital in Brooklyn, New York, which offers several medical services such as Surgical care, Radiology, OB/GYN, Cancer Care, Pediatrics, Psychiatry, Dentistry and Oral Surgery, Emergency medicine, Internal Medicine (Nephrology, Cardiology, Hematology, Rheumatology, Pulmonary Medicine, Gastroenterology, Infectious Disease etc.). TBHC also has Residency programs for Internal Medicine, Family Medicine, Surgery, OB/GYN, Pediatrics, Podiatry, Emergency Medicine, Pharmacy, Oral and Maxillofacial Surgery and Fellowship programs for Hematology/Oncology, Pulmonary Medicine, Cardiology and Gastroenterology.

I was selected by the Chief of Internal Medicine Department at HUEH to be part of this Externship rotation for a period of three months. I was assigned in several services in the in Internal Medicine at TBHC. The experience was extremely valuable and it significantly expanded my knowledge of medicine. In the next few pages, I will share with you in details a few highlights of my experience during this externship rotation.
Description of the rotation

The rotation was subdivided as follow:

- Floor/ Medicine
- Radiology / Interventional Radiology
- Vascular Laboratory
- Cardiology
- Nephrology
- Hematology/Oncology
- Gastroenterology
Floor/ Medicine: Sept 18th - Sept 22nd

I spend one week on the floor with a Team headed by Attending Hospitalist named Dr Martinez, with a few Residents MD and medical students. Every day from 9:00 AM to 12:00 PM, I assisted rounds from the 6th floor to the 9th floor, discussing multiple cases. Dr. Martinez reviewed with the medical students how to record patients history, how to present the information collected to the Attending physician; He review as well diagnostic procedures and blood work management. I observed a few cases such as UTI (Urinary Tract Infection), Sepsis, Stroke, Pneumonia, Kidney disease, Heart failure, Hyperglycemia, etc. I also had the opportunity to learn about new generation of medications, their prescription guide, their benefits and side effects to the patients.

Radiology/ Interventional Radiology Sept 25th- October 6th
Monday to Friday: 9:00 AM to 1:00 PM and 2:00 PM to 4:00PM

I spent two weeks with the medical team. During the first week, I observed X-ray (Head, Neck, Thorax, Abdomen, Arms and Legs), Ultrasound, CT scan, MRI with Dr G.Lee, and Dr G. Rappoport. I have seen the following cases:

- X-Ray: pneumonia, hemothorax, pneumothorax, pleural effusion, cardiomegaly, lung tumor metastasis, dextro and levo scoliosis, multiple fractures of bones (legs, arms, phalanges), osteoporosis, arthrosis, arthritis etc.
- Ultrasound: thyroid’s mass, liver disease (hepatomegaly, cirrhosis, hepatic masses, fatty liver), normal spleen, pancreatitis, appendicitis, fibroids, normal uterine in older and young women, ovarian cysts, ovarian masses, ovarian cancer.
- CT scan: cerebral ischemia, cerebral hemorrhage, breast cancer metastasis to brain.

During the second week in Interventional Radiology, I had the opportunity to observe some interventional radiology techniques such as: block neuronal for chronic pain to a male patient post Whipple’s disease, a pulmonary nodule’s biopsy and a spinal tap.

Vascular Laboratory: Oct 9th- Oct 13th
Monday to Friday 9:00 AM to 1:00 PM

I had the great pleasure to meet a Haitian vascular technician named Ms. Elourdes. She did not hesitate to share a lot of her knowledge. I reviewed the following cases: blood clot in the internal carotid, deep vein thrombosis, varicose veins, normal vascularisation and normal pressure in arms and legs on Doppler ultrasound.
**Cardiology: Oct 16th - Nov 3rd**

Monday to Friday 9:30 AM to 3:00 PM

On Mondays and Fridays from 9:30 AM to 12:00 PM clinical with Dr Sherlene Trotman, Cardiology Attending Physician. From 1:30 PM to 3:30 PM I performed EKG and Echocardiography readings. Tuesdays to Thursdays from 9:30 AM to 12:30 PM, I completed floor rounds with Dr Shah, Attending Cardiology and Fellow Dr Park, Residents and Medical Students.

I spent three amazing weeks in Cardiology and two days in the Catheterization laboratory and Nuclear medicine. I had the opportunity to observe multiple Stress Test (exercise or medication), multiple TTE with cardiology technician, and two TEE with attending and fellows. I have seen the following cases: Heart failure, Atrial fibrillation, Myocardial infarction, complete Heart block, Bundle branch block, Dilated cardiomyopathy, Aortic regurgitation with valve replacement, follow up patient with Pacemaker.

**Nephrology: Nov 6th - Nov 24th**

I spent three weeks in this department. I worked Monday thru Friday from 9:00 AM to 3:00 PM. On Mondays and Wednesdays from 9:00 AM until 12:30 PM, I worked in the Kidney clinic with Dr. Singh, Nephrology Attending Physician, Residents and medical students. From 1:30 PM until 3:30 PM, I worked in the Dialysis Clinic for TBHC out patient. I observed floor rounds from 1:30 PM to 3:00 PM. I learned significantly on the subject of ESRD, kidney disease, ICU patients on dialysis, allergic reaction to the dialyser and hemodyalisis access. I have seen the following cases: Acute and chronic kidney lesion, ESRD caused by various causes particularly HTA, diabetes, HIV patients on dialysis, patient on dialysis with Hepatitis B.

**Hematology/Oncology: November 27th to December 20th**

Monday to Friday: 9:00 AM to 4:00 PM

Tuesday: 9:00 AM to 10:00 AM, Journal club

Wednesday: 8:30 AM to 9:30 AM Fellows presentation weekly presentation on an assigned subject; 3:00 PM to 4:00 PM Hem/Onc Tumor Board meeting.

Thursday: 9:00 AM to 10:00 AM Tumor Board meeting; 10:00 AM to 11:00 AM clinical case conference.

My rotation in Hematology/Oncology department lasted four weeks. During that period, I spent three weeks with the consultation team that consisted of Fellows, medical students and attending physician. I observed the proper way to counsel cancer patients,
best follow up procedure. These services took place on Tuesdays thru Thursdays from 2:00 PM to 4:00 PM.

During my first week, I worked on the floor performing round with Fellows, medical students. We discuss diagnosis, case management, and differential diagnostic and follow up with inpatient. I had the opportunity to observe two bone marrow biopsies; one in Interventional Radiology, and one at the Hem/Onc’s office.

I observed the following cases: Breast cancer, Colon cancer, Iron deficiency, TTP(Thrombotic Thrombocytopenic Purpura), HIT( Heparin Induced thrombocytopenia), Thrombocytopenia in a pregnant woman at second trimester, Ovarian cancer, Uterine Cancer, Leukemia, Multiple Myeloma, Sicle cells, Thalassemia etc.

**Gastro-Enterology: Oct 30th - December 16th**

This rotation was held at the Great Brooklyn Gastro-Enterology (GBG), MJC and Omnicare with Dr Michel Jose Charles, GI (Gastro-Intestinal) physician.

My schedule was

- Thursday 2:00 PM to 7:00 PM (GI clinic) and
- Saturday from 7:30 AM to 12:00 PM (GI procedures, upper endoscopy, colonoscopy), 1:00 PM to 6:00 PM (GI clinic after GI procedures)
- Sunday from 7:30 AM to 12:00 PM (GI procedures).

I learned a lot from Dr. Charles. I performed Breath Test, explained and guided patients on how to prepare for endoscopy and colonoscopy (Suprep, Prepopik) procedures. I carried allergy test and seen some cases by myself (patient and examination). I discussed patient diagnosis and differential diagnosis, and management with Dr. Charles.

The Following cases were seen:

**Other Specialties:**

Dr. Joseph Pediatric HUM and I spent some times in the Respiratory Care Department. We had the opportunity to use the latest to CPAP (continuous positive airway pressure), BiPAP(Bilevel positive airway pressure), AVAPS. M. Choisy Claude, Respiratory Technician, provided us a crash course on how to maintain and manage the machines.

**Central line’s practice**

I completed a live simulated placement of central venous catheter (Jugular and Femoral) under Dr Louisdon Pierre supervision. I also performed a live ultrasound
practice with a team of Residents and Medical Student under the supervision of an Attending from Respiratory Emergency Care.

Conferences Presented

- October 11, 2017: Whipple’s Disease, Peritoneal Tuberculosis
- October 25, 2017: Peripartum Cardiomyopathy (PPCM)
- November 8, 2017: Aortic Regurgitation
- December 1st 2017: HIV Associated Nephropathy
- December 13, 2017: Thrombocytopenia in Pregnancy

Academic Conferences

- Monday to Friday: 12:30 PM conference only for Internal Medicine on different subject, journal club sometimes.

Social Activities

- General assembly of AMHE
- Annual AMHE’s Gala
- TBHC Christmas party
- GBG/MCJ Christmas party
Conclusion

TBHC three months rotation was an amazing experience. I am experience in dealing with only patients in Haiti, who of course have the same culture and background. During my rotation, I dealt with patients from various back grounds and cultures. This provided with valuable additional experiences and the rotation significantly sharpened my practice skills. It emphasized the limitation of the healthcare system in Haiti, which I already knew, but to experience it first hand was interesting to say the least.

Although Haiti healthcare system cannot be compared to the U.S. healthcare system, this rotation provide an opportunity for young physician from Haiti to use this experience to thrive to help set up new and innovative structures and procedures (short and long terms) that would improve Haiti healthcare system. For instance, in terms of structure, I observed that at TBHC Residents and Fellows work on supervision by an Attending. The medical library, up to date medical references, electronic chart, a cafeteria, are within the hospital to support physicians.

Lastly, the rotation was a really great experience. I think that every single Haitian Resident physician should participate in this program. Unfortunately not everybody can be selected. For those of you who will receive an invitation for this Externship, I will encourage you to hastily accept it. You will thoroughly enjoy the experience. Also, you must pay it forward by sharing your improve knowledge and experience to upcoming young physician.
Annexes

• AMHE: Association des Médecins Haïtiens à l’Etranger
• ESRD: End Stage Renal Disease
• HUEH: Hopital de l’université d’Etat d’Haïti
• HUJ: Hopital Universitaire de Justinien
• HUM: Hopital Univesitaire de Mirbalais
• ICU: Intensive Care Unit
• PICU: Pediatric Intensive Care Unit
• TTE: Transthoracic Echocardiography
• MRI: Magnetic Resonance Imaging
• NICU: Neonatal Intensive Care Unit
• NY: New York
• SIMACT: Société Immobilière d’Agriculture, de Commerce et de Tourism
• TEE: Transesophageal Echocardiography
• TBHC: The Brooklyn Hospital Center