BROOKLYN HOSPITAL CENTER
EXTERNSHIP REPORT

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Third Year Resident Internal Medicine
Hôpital Universitaire Justinien (HUJ)
Externship: September 17th to December 17th
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Introduction & Special thanks:

For years, The Association of Haitian Physicians Abroad (AMHE) and SIMACT (Société Immobilière d’Agriculture, de Commerce et de Tourisme) give the opportunity to Haitian residents (from “Hopital Université d’ Etat d’Haïti (HUEH)” and “Hopital Universitaire Justinien (HUJ)” to participate to a special rotations program in some hospitals of the United States of America.

I am James SANON, third year resident Internal Medicine at “HUJ”. As part of the continuity of this program, I had the privilege of being chosen to participate for 3 months in the internal medicine department and some subspecialties affiliated, at the Brooklyn Hospital Center.

First over, I thank God for giving strength and determination during this rotation. A special thanks to Dr Lesly Kernizant (SIMACT President) and all the members of this society, thanks to AMHE. Dr Gary A. Stephens; Senior Vice President and Chief Medical Officer for allowing me to integrate the internal medicine departments.

Thank you to Dr Patrick Leblanc (Chief of Neonatology, Brooklyn Hospital Center); Dr Paul E. Nacier (Chief of Endoscopy, Kingsbrook Jewish Medical Center); Dr Louisdon Pierre (Director Pediatric Intensive Care, The Brooklyn Hospital Center); who helped me in many ways.

A special thanks to Dr. Michel Pierre (Chief, Internal Medicine department, HUJ); Dr. Yrvel Zephyr (Resident’s training manager at HUJ).

Thanks to the attendings for sharing to me their knowledges:

- Dr. Jonathan Martinez (Hospitalist Team Director)
- Dr. Sherlene Trotman (Department of cardiology)
- Dr. Elizabeth Guevara (Chief, department of Hematology/Oncology)
- Dr. Woo Taek Chang (Chief, department of Nephrology)
- Dr. Moshe Fuksbrumer (Department of Radiology)
- Dr. Naveen Goyal (Department of Neurology)
- Roxanne Nora (Respiratory Therapist)
- Claude Choisy (Respiratory Therapist)

Thanks to all the fellows, residents, medical students who taught me about the American health system.
Description of the rotation

The rotation was subdivided as follow

- Internal Medicine (Hospitalization): 2 weeks
- Cardiology: 2 weeks
- Hematology-Oncology: 2 weeks
- Respiratory Therapy: 1 week
- Nephrology: 3 weeks
- Radiology: 1 week
- Neurology: 2 weeks

Internal medicine (Hospitalization)

- Morning report: 7:00h – 8:00h
- Round: 8:30h-11:00h
- Noon conference: 12:30h-13:30h

Cases seen:

- Chronic Pancreatitis
- Pulmonary Hypertension
- Pulmonary Embolus
- Cirrhosis Alcoholic
- Infectious Endocarditis
- Staphylococcus Aureus Resistant Methicillin (SARM) infection
- Calciphylaxis (Calcific Uremic Arteriolopathy): an uncommon disorder.
- Superior Vena Cava thrombosis
➢ **Cardiology**

- Round : 8:30h – 11:00h
- Noon conference : 12:30h- 13:30h

**Cases seen:**

- Atrial fibrillation (muy common)
- Congenital aortic Regurgitation
- Brugada Syndrome
- Bi-ventricular pacemakers
- Atrioventricular (AV) Blocks
- Ventricular Tachycardia
- Myocardial Infarction

**Activities:**

- Special EKG training: 4 sessions (40 EKG interpreted) with Dr Sherlene Trotman.
- Procedure assisted: “Stress Test” { with medication / with exercises }

➢ **Hematology / Oncology**

- Monday to Friday 9:00h -16:00h clinic or consult
- Tuesday 8:30 -10:00h Conference, 10:00h-15:00h clinic or consult
- Thursday: 9:00h -10:00h Tumor Board

**Cases seen:**

- Chronic Lymphocytic Leukemia (CLL)
- Multiple Myeloma
- Smoldering Myeloma
- Pancreatic Cancer
- Breast Cancer
- Lung Cancer
- Carcinoma of Esophagus
- Metastatic Colon Cancer
✓ Cancer of Unknown Primary
✓ Gioblastoma Multiforme
✓ Heparin -Induced Thrombocytopenia
✓ Thalassemia

Activities:

✓ Counseling of oncologic patients / Consent for Chemotherapy.
✓ Read slides of peripheral blood smears with the team.
✓ Articles discussed:
  • Oral Ixazomib, Lenalidomide, and Dexamethasone for Multiple Myeloma
  • Nivolumab in Combination With Platinum-Based Doublet Chemotherapy for First-Line Treatment of Advanced Non-Small-Cell Lung Cancer

➢ Respiratory Therapy
✓ Round with the respiratory therapist
✓ Learning about types of ventilation
✓ Intubation & Extubation Criteria
✓ Arterial Blood Gases “interpretation”

➢ Nephrology
  ❖ Monday to Friday : 9:00h-16:00h Consult
  ❖ Monday to Sunday : Dialysis Unit ( Impatient and Outpatient )
  ❖ Wednesday and Friday : Clinic

Cases seen:

✓ Acute Kidney Disease
✓ Chronic Kidney Disease
✓ Acute kidney Disease on Chronic Kidney Disease
✓ Nephrotic Syndrome
✓ Hypercalcemia
✓ Contrast Induced Nephropathy
✓ Atypical Hemolytic Uremic Syndrome (aHUS) on Chronic Kidney Disease
✓ Hyperuricemia
✓ Hepato-Renal Syndrome

Activities

✓ **Topics discussed:** 1) Dialysis 2) Creatinine regulation. 2) Hypercalcemia. 3) Dysnatremia. 4) Hypokalemia. 5) Hepato-Renal Syndrome. 6) Renal Tubular Acidosis.
✓ **Procedure:** “Dialysis”
  • Dialysis Machine
  • Dialysis Modality
  • Dialysis access: AV fistulas / Synthetic Grafts and others.

➢ **Radiology**

✈ During my rotation in radiology, my schedule was {Monday: 10h00 -12h00 / Tuesday: 9h00-10h00 / Wednesday to Friday: 9h00-15h00.
✓ I had the opportunity to learn a basic on: **CT-Scan ; X-ray ; Ultrasonography ; MRI**

**Cases seen:**

✓ Degenerative joint disease (CT Scan of the abdomen)
✓ Arteriosclerosis disease (Chest CT Scan)
✓ Bronchiectasis (Chest CT Scan)
✓ Mild Multilevel Lumbar Spondylosis (Lumbosacral Spine X-ray)
✓ Pneumothorax (Chest X-ray)
✓ Moderate to severe bilateral Hydro-utero-nephrosis (Ultrasound)
✓ Intussusception “Colocolonic” “Lipoma in the Colon” (Ultrasound)
✓ Polycystic Kidney (Ultrasound)
✓ Appendicitis (CT Scan of the abdomen)
✓ Enlarged Myomatous Uterus (Ultrasound)
✓ Testicular torsion (Ultrasound)
▫ Infarctus in the right Thalamus (CT Scan of the brain)
▫ Infarctus in the right Cerebellum (CT Scan of the brain)
▫ Mild white matter microvascular ischemic disease (CT Scan of the brain)
▫ Infarctus in the left Midbrain (CT Scan of the brain)
▫ Encephalomalacia in the left parietal lobe (CT Scan of the brain)
▫ Cross fused renal ectopia “Horseshoe kidney” (Ultrasound)
▫ Ductus arteriosus diverticulum (Chest CT Scan)
▫ Pulmonary Embolism (Chest CT Scan)
▫ Angiomyolipoma Kidney (CT Scan of the abdomen)

➢ Neurology

❖ Monday to Friday : Round (13:h 00 – 16h30)

Cases Seen:

✓ Epilepsy
✓ Vascular Dementia
✓ Pseudodementia
✓ HIV Neuropathy
✓ Hypoxic Ischemic Encephalopathy
✓ Neurogenic Bladder
✓ Syncope
✓ Sciatica
✓ Motor Axonal Neuropathy
✓ Chronic Demyelinating Polyneuropathy
✓ Cerebral Toxoplasmosis
✓ Transverse Myelitis
✓ Posterior thalamic stroke
✓ Parkinson Disease
✓ Acute Metabolic Encephalopathy
✓ Meningioma
✓ Spinal cord compression

Central lines practices

- Under supervision of Dr Louisdon Pierre, I completed the course of placement of Central Venous Catheter.

Bi-weekly Conferences I presented:

- Chronic Pancreatitis : October 5, 2016
- Atrial Fibrillation : October 26, 2016
- Heparin-induced Thrombocytopenia : November 9, 2016
- Nephrotic Syndrome : November 23, 2016
- Approach to a patient with Tremor : December 14, 2016

Bi-weekly Conferences I assisted

- Myocarditis
- Congenital Toxoplasmosis
- Diagnostic approach to short stature in children
- Malignant Hyperthermia
- Intraoperative Bronchospasm

Topics presented to attending:

- Atrial Fibrillation (cardiology)
- Pathophysiology of hypercalcemia (Dr William Shilkoff / Nephrology)
- Renal Tubular Acidosis Type I (Dr William Shilkoff / Nephrology)
Morning report /Noon conference:

- Guillain-Barré Syndrome
- Constrictive Pericarditis
- Celiac Disease
- Sclerosant Cholangitis
- Chronic Hepatitis B
- Pneumocystosis
- Transitory Ischemic Accident
- Sepsis
- Pleural Effusion
- Dementia
- Cancer of Unknown Primary
- Metastasis Lung Cancer (tumor board)
- Carcinoma of the esophagus
- Venous Thromboembolism and Hemophilia
- Oncologic Emergencies
- Delirium
- A Randomized Trial of intensive versus standard Blood Pressure control
- Overview of Palliative Medicine
Conclusions and Recommendations

This rotation program is very helpful for Haitian residents on several aspects; to understand the importance of forensic medicine; the patient must be comfortable above all; the quality of care and the importance of having a definitive diagnosis for proper care. Being resident in internal medicine, rotation is crucial for me, because having the opportunity to participate in several subspecialty services, those that hardly exist in Haiti. I would like the program to find its place in many US hospitals so that more residents can benefit from this training, and I dream one day, my country will have a health system adapted to the needs of the population.