THE BROOKLYN HOSPITAL CENTER (TBHC)

Keeping Brooklyn healthy

INTERNERSHIP REPORT

Full Name: Pierre Edwige Lavalasse FILS
Location: The Brooklyn Hospital Center (TBHC)
         Brooklyn, NY, USA
Period: April 12 to July 14, 2017
Supervisors: Dr P. Nacier, Dr P. Leblanc and Dr Pierre
             Resident in the Second year
             Family Medicine at
             The Justinian University Hospital
Made on 12 July 2017
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II. Introduction
III. Words of Thanks
IV. Objectives of the Internship
V. Schedule of the Internship
VI. Activities / rotations
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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMHE</td>
<td>Association des Medecins Haitiens a l’Etranger</td>
</tr>
<tr>
<td>SIMACT</td>
<td>Simulation Tool in Action</td>
</tr>
<tr>
<td>TBHC</td>
<td>The Brooklyn Hospital Center</td>
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<tr>
<td>IMC</td>
<td>Interfaith medical Center</td>
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<tr>
<td>HUJ</td>
<td>Hopital Universitaire Justinien</td>
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<tr>
<td>NCIU</td>
<td>Neonatal Intensive Care Unit</td>
</tr>
<tr>
<td>FM</td>
<td>Family Medicine</td>
</tr>
<tr>
<td>Fam. Med.:</td>
<td>Family Medicine</td>
</tr>
<tr>
<td>IM</td>
<td>Internal Medicine</td>
</tr>
<tr>
<td>COPD:</td>
<td>Chronic Obstructive Pulmonary Disease</td>
</tr>
<tr>
<td>HIRM</td>
<td>Hospital Internal Medicine Room</td>
</tr>
<tr>
<td>COPD:</td>
<td>Chronic Obstruction Pulmonary Disease</td>
</tr>
<tr>
<td>AMS 2/2:</td>
<td>Altered Mental Status 2ndary</td>
</tr>
<tr>
<td>S/P:</td>
<td>Status post</td>
</tr>
<tr>
<td>UTI:</td>
<td>Urinary tract Infection</td>
</tr>
<tr>
<td>CAP:</td>
<td>Community Acquired Pneumonia</td>
</tr>
<tr>
<td>LE ulcer:</td>
<td>Lower Extremity ulcer</td>
</tr>
<tr>
<td>UTI POA:</td>
<td>UTI was Present On Admission</td>
</tr>
<tr>
<td>HCAP:</td>
<td>Health Care-Associated Pneumonia</td>
</tr>
<tr>
<td>R/o:</td>
<td>ruled out</td>
</tr>
<tr>
<td>W/o:</td>
<td>Without</td>
</tr>
<tr>
<td>ACS:</td>
<td>Acute Coronary Syndrome</td>
</tr>
<tr>
<td>TMA:</td>
<td>Trans Metatarsal Amputation</td>
</tr>
</tbody>
</table>
MI: Myocardial infarction
HD: Hemo Dialysis
DUB: Dysfunctional Uterine Bleeding
BIPAP: Bilevel Positive Airway Pressure
OM: Osteomyelitis
ICP: IntraCranial Pressure

INTRODUCTION

In order to widen our knowledge, to have new experiences in the field of health care, certain institutions or organizations such as AMHE, SIMACT, directors of training of university hospitals, directors of hospitals, heads of departments of different departments and The Deans of the Faculties of Medicine are joining to create a program of internship abroad, more precisely in the United States, in New York and today I am proud to be beneficiary.

I am Dr Pierre Edwige L. FILS, resident in the Second year of Family Medicine at the Justinian University Hospital. We are five residents in training at HUJ, and of these five I was selected.

This training course is extended over a period of 90+3 days, beginning on 12 April 2017 and ending on 15 July 2017.
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WORDS OF THANKS

My thanks to:

1) God, he is always guiding me
2) AMHE members (Dr Paul Nacier, Dr Patrick Leblanc, Dr Eric Jerome, Dr Alix Dufresne and Dr Jose Michel Charles)
3) AMHE-CEC, President Dr. Serge Pierre Louis
4) SIMACT (Dr Lesly Kernisant, CEO –INC;
   Mr. Fritz M. Clairvil CEO of SimACT Foundation
5) The Brooklyn Hospital Center (Richard B. Becker, President and CEO)
6) Chairman, Department of Family Medicine at TBHC (Dr Abraham Sherly)
7) Professional Staff- Physician, Department of Family Medicine at TBHC and Attending Physician Medicine at IMC (Dr Saint Louis Frantz [my teacher] and also Dr Prya Shah, MD-Attending physician FM (inpatient)
8) Chairman, department of Pediatric of TBHC (Dr Patrick Leblanc), and also (Dr Morales Yesenia), his associate. (INPATIENT)
9) Chairman, Department of Family Medicine at HUJ (Dr Genna Wilner) and the whole team, (Dr. Vulcain, Resp Haiti project)
10) Leaders of HUJ (Haiti):
    Dr. Jean Getro Dube, Executive Director
    Dr. Jean Gracia Coq, Medical Director
    Dr Yvel Zephyr, Head of Academic Training
11) To my dear parents (pastor Monace FILS and Sr Marie Josette LAVALASSE), my brothers and sister (Pierre Edouard and family, Ralph Mardochee and family, Ben-Oni and family, and Esther Julnide), my uncles and aunts, my fiancee Christ-Lord FORESTE and to my friends who supported me during my rotation.

OBJECTIVES OF THE INTERNSHIP

I. Observing, comparing, analyzing and commenting on the management of different pathologies, clinical and para-clinical approaches through different rotations compared to what we do in Haiti, specifically in Justinien.
II. Integrate fully the family medicine service (go to the extended clinic, the ward, the emergency room), participate in the activities of the other services.

III. Observation of procedures

IV. Rotations in family medicine, internal medicine, pediatrics, obstetrics and gynecology, surgery, especially pediatric and adult emergencies

The **Family Medicine Service at TBHC** is located on the first floor in a 19-story building (**Maynard Building**).

It contains 1 reception area, 1 waiting room, 10 consultation rooms, 1 triage room, 1 vaccination room, 1 room acute care (IV, nebulization, dressing), 1 room of small surgery (abscess, sutures), A pharmacology and therapy room, and a blood collection room (blood, urine).

**SCHEDULE OF THE INTERNSHIP**

During my internship at Brooklyn Hospital, I was assigned to Family Medicine, Pediatrics, and sometimes to Internal Medicine and here is my schedule:

**The outpatient clinic of the Family Medicine Service** at Brooklyn Hospital operates Monday to Friday from 8am to 8pm in
3 slices of hours, 8am-12.30pm, 1pm-5pm, and 5.30pm to 8pm, and also every Saturday From 8am to 1pm

I worked with the Head of Family Medicine Department (Dr. Abraham Scherly), and with also Professional Staff- Physician, Department of Family Medicine at TBHC (Dr. Saint Louis Frantz Fils) and sometimes with residents 2 or 3 of the service, and also Dr Prya Shah (attending physician family Medicine, Inpatient).

### From April 17 to June 09, 2017

<table>
<thead>
<tr>
<th>Hours/Days</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednes.</th>
<th>Thurs.</th>
<th>Friday</th>
<th>Sat.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8am-12h30p</td>
<td>Dr Abraham</td>
<td>Dr Abraham</td>
<td>Present. with R2 and /or R3</td>
<td>Dr. Saint Louis</td>
<td>Dr Saint Louis</td>
<td>Free</td>
</tr>
<tr>
<td>1pm-5pm</td>
<td>Resident 2 or 3</td>
<td>Dr Abraham</td>
<td>Resident 2 or 3</td>
<td>Dr Saint Louis</td>
<td>Dr. Saint Louis</td>
<td>Dr Saint Louis</td>
</tr>
<tr>
<td>5h30pm-8pm</td>
<td>Dr. Abraham</td>
<td>Dr. Abraham</td>
<td>Dr. Abraham</td>
<td>Dr Saint Louis</td>
<td>Dr Saint Louis</td>
<td>Dr Saint Louis</td>
</tr>
</tbody>
</table>

This schedule has been changed for the first 3 days of the week starting 12 June 2017.

### From May 15, 2017 to May 19, 2017

I was with Dr. Saint Louis at Dr. Valme' Clinic located at 1010 Ocean Avenue, Brooklyn NY 11226 from 9am to 5pm for the outpatient clinic.

I worked with Dr. Patrick Leblanc, head of Neonatology at the Brooklyn Hospital every Tuesday from 8:30 am to 4:00 pm, as well as Dr. Prya Shah (Attending), a family medicine physician
Who works in the hospital ward (department of internal medicine) every morning from 8:30 am to 11:00 am.

Here is the calendar:

**From June 12 to July 14, 2017**

<table>
<thead>
<tr>
<th>Schedule Modified From 12 June to 14 July 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hours/ Days</strong></td>
</tr>
<tr>
<td>8am-12h30 Pm</td>
</tr>
<tr>
<td>1pm-5pm</td>
</tr>
<tr>
<td>5h30pm-8pm</td>
</tr>
</tbody>
</table>

**N.B:** April 13 and April 14, 2017, I worked with Dr. Patrick Leblanc in the pediatric department from 8:30 am to 1:30 pm.

**ACTIVITIES:**

I. Attend a **meeting** on Thursday, April 13, 2017 called: **Bioethics Committee meeting**, which done with the following services: (Community Manager, Geriatrics, Case Manager, Hospice of NY, Nursing Education, Patient Palliative Case, Social Workers, Pastoral Care, Senior Director of Nursing, Risk Manager, Palliative Care.)
II. Participate in the presentations of residents 2 and / or 3 of Family Medicine every Wednesday from 8:30 am to 1:00 pm. (Period before June 12, 2017). Subjects:
- Proximal Humerus fractures in adults
- Empagliflozin
- Rosea infantum
- Pityriasis Rosea
- Tinea infection
- Scarlet fever
- Erythema infectiosum

III. Participate in medical sessions (presentations and discussion of patient cases) in pediatrics with Dr. Patrick Leblanc every Tuesday and sometimes Thursdays. (Period after 12 June 2017); and Dr Morales Yersinia.

IV. Bi-weekly presentations to Dr. P. Leblanc, Dr. L. Pierre and Dr. P. Nacier in Dr. Leblanc's office, every other Wednesday from 4pm to 6pm.

My Bi-weekly Presentations are:

<table>
<thead>
<tr>
<th>Dates</th>
<th>My presentations</th>
<th>Presentations followed</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/26/17</td>
<td>Metformin or Glucophage</td>
<td>Katargener Syndrome</td>
</tr>
<tr>
<td>05/10/17</td>
<td>Approach of a patient with Ischemic Cardiomyopathy</td>
<td>Radiation Biology</td>
</tr>
<tr>
<td>05/24/17</td>
<td>Atopic Dermatitis</td>
<td>Made, by Dr. Thimothée</td>
</tr>
<tr>
<td>06/07/17</td>
<td>Carpal Tunnel Syndrome</td>
<td>Jean Claude,</td>
</tr>
</tbody>
</table>
(Resident ending in HUEH Radiology) at Brooklyn Hospital.

<table>
<thead>
<tr>
<th>Date</th>
<th>Diagnosis</th>
<th>Beta blockers</th>
<th>Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/21/17</td>
<td>Diagnosis of Endometriosis</td>
<td></td>
<td>Dr. Florestal Florette, residente3 in Anesthesiology HUEH</td>
</tr>
<tr>
<td>07/05/17</td>
<td>Acute Alcohol Intoxication</td>
<td>Beta blockers</td>
<td></td>
</tr>
</tbody>
</table>

NOTIONS LEARNED

During this internship program, I learned a lot of things:

- In the pediatric rounds with Dr. Patrick Leblanc;
- In the outpatient consultations of the Family Medicine Department with Dr. Abraham Scherly and Dr. Saint Louis, respectively, Head of department and physician trainer of residents;
- With Dr. Prya Shad, an attending physician of family medicine (IN PATIENT);
- In the conferences made by the residents of the service,
- In our presentations with Drs. Patrick Leblanc, Nacier Paul and Pierre Louisdon every two Wednesdays.

I learned to better manage cases of the pathologies most encountered in Family Medicine, in Pediatrics, some in internal medicine.

Diseases encountered in various departments at Brooklyn Hospital during my internship period from April 13 to July 15, 2017

<table>
<thead>
<tr>
<th>Family Medicine (outpatient)</th>
<th>Pediatrics (NICU) (in patient)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Hypertension +++++</td>
<td>- Prematurity +++++</td>
</tr>
<tr>
<td>- Diabetes +++++</td>
<td>- Respiratory tract +++++</td>
</tr>
<tr>
<td>- Hypercholesterolemia,</td>
<td>- Sepsis neonatal +++</td>
</tr>
</tbody>
</table>
dyslipidemia ++++
- Allergic conjunctivitis ++
- Folliculitis++
- Fungal skin infection +++
- Contusion of tissues +++
- Carpal tunnel syndrome +++
- Tonsillitis +++
- Anxiety+++ 
- Panic attack +++
- Bipolar Depression ++
- Gastritis ++++
- Arthritis of the Knee ++++
- Dyshyrodose ++
- Osteoarthritis +++
- Osteoporosis ++
- Peripheral Artery Disease ++
- Extrapyramidal Syndrome ++
- Liver cirrhosis +
- Hepatitis B +
- Hiatal hernia +
- Spondylolisthesis grade 1 +
- Lupus vs Vitiligo +
- lung cancer ++
- Colon cancer stage 4 ++

- Neonatal Diabetes +++
- Neonatal Hypoglycemia ++
- Neonatal Hypothermia ++

We discussed slightly on:
approach of a patient with
- Gastric pain,
- colic pain,
- valvulopathy
- COPD
- Asthma
- CAD

N.B:
(5+; 4+) most viewed
(3+) least viewed
(2 + 1 +); even less

<table>
<thead>
<tr>
<th>Diseases encountered in various departments at Brooklyn Hospital during my internship period from June 12 to July 14, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medicine (inpatient) Dr Prya Shad</td>
</tr>
<tr>
<td>Department of Internal Medicine</td>
</tr>
<tr>
<td>- AMS 2/2 sepsis due to aspiration pneumonia</td>
</tr>
</tbody>
</table>
- UTI/ Seizure disorder
- Recurrent Syncope vs Hypoglycemia
- Alcohol Intoxication
- Acute depressed fracture of L2 vertebral body 2/2 mechanical fall
- Uncontrolled Diabetes Mellitus
- Sepsis due to UTI PO A
- LE ulcer with Cellulitis
- CAP r/o inflammatory vs Malignancy process
- Sepsis likely 2/2 HCAP
- Left foot cellulitis s/p L foot TMA
- Infected right foot diabetic ulcer w/o OM
- Abdomian pain suspected inflammatory colitis
- Testicular pain r/o epidermitis vs abscess vs hernia
- Abdom pain and dient in the setting chronic Hep C / Cirrho
- Alcohol Withdrawal/ suspected ICP/ UTI

- Chest pain-ACS ruled out
- Dizziness 2ary to orthostatic hypotension and hypoglycemia. // Acute stroke
- Chest pain r/o MI, fluid overload 2/2 missed HD
- Syncope/ DUB /chest pain r/o MI
- Acute hypercapnic hypoxic resp failure s/p intubation on BIPAP due to advanced COPD. HCAP
- Multiple right side rib fractures 2/2 fall
- Hyperosmolar hyperglycemia state
- Dyspnea and pulmonary edema 2/2 hypertensive urgency
- Asthma exacerbation
- COPD exacerbation
- Atypical chest pain r/o MI
- Epigastric pain likely 2/2 viral gastroenteritis. Pancreatitis ruled out.

REMARKS

As a remark:

1) In the **Department of Family Medicine**, I have seen, and noted

- In terms of data and quality management: they have a well-established system for patient information, very good
documentation (computarized data), consultation sheets, laboratory tests, etc… and also there is an interconnection between the various services that connect them (FM and laboratories, and urology, and podiatrist, and pharmacy, and pneumology, cardiology, and orthopedics, and psychiatrist, psychologist, etc ...)

Appointments and follow-ups have been carried out, maintained. Patients with chronic diseases have a checkbook (medication, appointments, references, remarks) in hand

- In terms of taking care of diseases, there is not really any difference apart from the labs that are on hand, available, adequate materials and certain drugs that we do not have, it is the same approach that With us.

I was surprised to learn that there are about twenty subspecialties in Family Medicine in USA: Sleep Medicine, Pain Medicine, Adolescent Medicine, Geriatric Medicine, Hospice and Palliative Care Medicine, Emergency Medicine, Faculty Development, Hospital Medicine, Integrative Medicine, International Medicine, Obstetrics, Preventive Medicine, Research Medicine, Rural Medicine, Sportive Medicine, Substances Abuses, Urgent Care, Women’s Health, etc...

And these remarks are also valid for other services...

2) I find that he did not really have a coordinated helper during my visit to the family medicine department ... although I was very well received in pediatrics with Dr. Leblanc for my integration in the hospital, So quickly had to make the contacts so that I was transferred to my service. Arrived in the latter, I was submitted a schedule, I was welcomed
by the head of the Department, Dr. Abraham, who later could not take me in charge. Then, seeing its unavailability, I had to make proposals for a rotation in other services that did not succeed like pediatric and adult emergencies. And thank you again to Dr. Saint Louis who happily was present and who supervised me every Thursday and Friday from April 20 to July 15, 2017. And on this I suggest these few elements for a better framework of future Haitian residents in family medicine.

**SUGGESTIONS**

I suggest that there be a well-defined rotation plan (in family medicine, internal medicine, pediatrics, obstetric gynecology especially in pediatric and adult emergencies) for the next family physician-resident, a schedule made by the head of the
Department of Family Medicine in agreement with the Heads of Department of other services.

CONCLUSIONS

In fact, I spent an excellent three months internship, I learned a lot, observed, noted, identified, discussed ... I am sure that this information will be useful to me throughout my professional career while allowing me Better apprehend and manage diseases, and thus serve my country. I shall also transmit them to my successors.

I am satisfied with the internship, and my objectives are reached at 80%. And I thank once again all those who have contributed to this success.

I hope that medicine in Haiti will have a much higher standard and that the population will recognize the importance of this specialty, which is family medicine, and that someday there will be sub-specialties.

SOME IMAGES OF MEMORIES
Service dashboard

Dr. Saint Louis and I

Dr. Abraham (Chairman of FM at TBHC) and I
Dr Nacier, me and Dr Leblanc

Dr Florestal, Me, Dr Nacier and Dr Leblanc
Room for consultation in the family medicine department at TBHC
N.B: This work was supervised, seen and corrected by Dr. Paul Nacier, Dr. Patrick Leblanc and Dr. Pierre Louisdon.

Special thanks,
I would like to thank Dr. Patrick Leblanc and Dr. Nacier for their mental and medical support, their attention, their dedication and their financial support for the success of this experience. I call him the indefatigable Dr. Leblanc who has always been there to give us his support, he is never tired. Thanks again. Thank you for food cards, shopping, everything and everything. Said Dr. Nacier: "As soon as you have a problem, do not hesitate to call Dr. Leblanc and I"
Dr Nacier, thank you for the calls, for our conversations in English although it was difficult for me to converse but in fact there is a very small improvement, thank you also for the corrections during our presentations.

I will never forget everything you have done for us.

Dr. Pierre Edwige L. FILS
Resident in the Second year
Family Medicine at
The Justinian University Hospital

Made on 12 July 2017