

ROTATION REPORT

OUTLINE

1. Introduction and Thanks
2. Selection criteria
3. Timing, Rotations, Academic activities report
4. Cost
5. Comments and suggestions

Introduction and thanks

My name is Dr. Edelson DEMESIER, third year internal medicine resident at Justinien University Hospital (Cap-Hatien, Haiti).

I was selected to participate in an internal medicine externship at The Brooklyn Hospital Center, in Brooklyn, New York, 11201 and Interfaith Medical Center (1545 Atlantic Avenue Brooklyn, New York 11213) for a period of approximately ninety days, commencing May 28 to August 24, 2012. This is a special program achieved by the Association of Haitian Physicians Abroad and SIMACT.

I would like to express my gratefulness to all who contributed for the success of this enriching experience specially:

- AMHE (In particular Dr P.Nacier And Dr P.Leb Blanc)
- SIMACT (Dr Lesly Kernisan)
- The Brooklyn Hospital Center (Dr R.B.Becker, CEO)
- Interfaith Medical Center (Dr.Erick Jerome , Dr.Alix Dufresne, Dr. Shein)
- Medical Staff of Hôpital Universitaire Justinien (Dr. Yvel Zephyr and Dr. Pierre Michel)
- THBC staff (Dr. Loidson Pierre, Dr.M.Fuskbrumer, Dr. M.Dekhal, Dr. S. Anand, Dr. Valery Brutus, Dr. Segun Adenoye, Miss Elourdes)
- My Family (D. Jean Ernst ,E. Rosite, D. Lexident,B.Tony , R. Polycarpe)

Eligibility

To be eligible the resident must:

- A. Be in second or third year residency at Hopital Universitaire Justinien
- B. Have an advanced level in English

- C. hold a passport with American visas
- D. be able to afford a plane ticket from Haiti to New-York

Rotations and timing

1- Pulmonary function test (May 31 – June 1st 2012 from 8h00 am to 4h00 pm)

Management of patients with respiratory distress with the Respiratory therapist

- Mechanical ventilation
- Non-invasive ventilation (BIPAP/IPAP)

2- Family Practice (June 4 to 8 2012 from 8h00 am to 4h00 pm)

- Morning report with the staff
- Familiarization with the system
- Use of electronic records (Eclipsys gateway 5.5)
- Evaluation of patients with the resident
- Rounds with the Attending and residents
- Wednesday lecture with resident (New guidelines for BPCO exacerbation, Myocardial infarction)

3- Radiology Department (June 11 to 22 2012 from 9:00 am to 4:00 pm)

ULTRASOUND

- Identification Of normal abdominal structures
- Kidneys stone, cyst
- Gallbladder stone
- Uterus fibroids

HEAD CT SCAN

- Normal anatomy, Fractures identification, Hemorrhage, Herniation, Hydrocephalus, Infarction

BODY CT SCAN

Neck: Thyroid, arteries, veins, trachea, vocal cord

Chest:

- Heart silhouette, effusion cardiaque, Aorta segments, atherosclerosis, aneurysm
- CT Angiogram, pulmonary artery, pulmonary emboli
- Mediastinum Evaluation (mass, nodes), Bronchi evaluation, Bronchiectasis, Lung mass, pleural effusion, Atelectasis,
- Breast mass, axillary lymph node

Abdomen:

- Normal liver, liver mass, Bile ducts, Liver metastasis, IVC evaluation
- Normal Gallbladder, Cholecystitis, Gallstone
- Normal pancreas, pancreatic mass, Pancreatitis
- Normal Small intestine, Small Bowel obstruction, Intussusception
- Normal Kidney, Kidney stone, Obstructive stone, Hydronephrosis, kidney cyst
- Normal Prostate and Bladder, Enlarge prostate, scrotum mass
- Normal Uterus
- Evaluation of Bones (osteopenia, degenerative changes, fractures, metastasis)

4- Vascular Lab (June 25 to 29 2012 from 9:00 am to 3:00 pm)

Carotid Ultrasound: Identification normal anatomy (carotid artery, Internal CA, External CA, Carotid bifurcation, vertebral arteries)

- Atherosclerotic plaque, stenosis, Intimal- Medial thickness

Ultrasound Doppler of the lower Limb: Identification normal anatomy (Primitive Iliac Vessels, Great Saphenous vein, popliteal vein)

- Diagnosis Of chronic venous insufficiency, Pulse volume recording

5- Emergency Department (July 2 to 13 2012 from 7h00 am to 3h00 pm)

- Review cases of the evening
- Lecture of a challenge case over night
- Evaluation of patients with the resident of the day
- Cases Discussion with the senior resident and the Attending
- Reading x-ray challenge of the day

6- GI (July 16 to 27 2012 from 8:30 am to 4:00 pm)

Endoscopy: Identification Of normal upper GI tract (oesophagus, stomach, Duodenum)

- Oesophagitis, Gastritis , Gastric ulcer, Gastric nodule and lipoma, upper GI bleeding, Gastrostomy tube, duodenitis, duodenum ulcer

Colonoscopy: Identification Of normal lower GI tract (Small intestine and large intestine)

- Polyp, Polypectomy, Diverticulosis, Proctitis, Haemorrhoids

ERCP: Identification of normal biliary tract

- Indication of ERCP, Sphincterotomy and stone removal, Stent, ampullary cancer

Participating at the Rounds with the fellows, get consent before the procedure

7- MICU (July 30 to Aug 3 2012 from 8h00 am to 3h00 pm)

- Evaluation and evolution of patients with the resident
- Participating at the rounds with the attending
- Reading x-rays with the radiologist

8- Nephrology at Interfaith Medical Center (Aug 7 to 24 2012 from 8h00 am to 4h30 pm)

- Acute renal failure
- Chronic renal failure
- Acid base disturbances
- work with the hemodialysis team
- Round with the resident and the attending of the day
- Ensuring and present the evolution of patient during round
- Participate in the morning report with the internal medicine and the cardiology team between 8h00 am to 9h00 am
- Practice ECG reading with Dr Alix Dufresne

Activities report

Bi-weekly meeting with Dr P.Nacier, Dr P.Leb Blanc, Dr L.Pierre

June 20th: Atrial fibrillation

July 6th: New Anticoagulant

July 18th: Acute Pancreatitis (1th part)

Aug 1th: Acute Pancreatitis (2nd part)

Aug 15th: Chronic Kidney Disease

I had the opportunity to discuss GI exam with Dr P.Nacier it was very rewarding

Cost

During these three months i have been supported by AMHE, was hosted at the Menard Building, received:

- Meal tickets
- Laundry card
- 150 USD for the phone subscription
- 100 USD for metro card
- 300 USD each two weeks
- Supermarket was refilled approximately every two weeks.

Comments and suggestions

I was very satisfied of these three months. That was a great opportunity to evaluate myself and to compare health system of the United States with our country. I learned a lot of thing toward this externship program, specially I realize without technology as we think in Haiti, we can do better for our patients if we have a good coordination team.

I wish that AMHE and SimACT will planify with the American ambassador for according visas for the resident eligible to this programme. And other residents will benefit from this rotation

Edelson DEMESIER MD
3th year Internal Medicine
HUJ