

Categorical and Preliminary Internal Medicine Residency Training Department of Medicine, Harbor-UCLA Medical Center 2014-2015 (For applicants applying for the 2015 Academic Year)

Harbor-UCLA Medical Center is a *public* hospital, and public hospitals have a rich and proud tradition of linking patient care for the underserved, outstanding residency training programs, and academic and research productivity. Harbor-UCLA Medical Center carries on that tradition—it is a public hospital, one of the major teaching hospitals of the David Geffen School of Medicine at UCLA, *plus* a separate research entity (LA Biomedical Research Institute). For over 60 years, it has been a "Harbor tradition" that our trainees develop their clinical skills and medical knowledge in an environment that strikes a balance between independence and supervision. When you join us as a resident, you will be challenged to use your initiative and clinical judgment, but at the same time, our faculty provides a judicious amount of teaching and supervision. After all, that's why you are in training—to learn internal medicine.



Our residents see the widest possible range of internal medicine problems, and their experience gives them the skills and knowledge to succeed in any internal medicine career. Our graduates have accepted internal medicine and subspecialty faculty positions, entered medicine and subspecialty fellowships, or have joined medicine practices throughout California and the U.S.

Harbor-UCLA's Department of Medicine faculty, researchers, and trainees are closely involved in biomedical research. Federal, non-profit, and industry research grants support molecular and cell biology, animal research, and clinical and epidemiological studies. Specialized research centers focus on cancer epidemiology, coronary artery disease, infectious diseases, pulmonary hypertension, COPD, and much more. While research is not unusual in public hospitals, we have basic science and clinical research built into our history and our current mission.

We are especially pleased to announce that ORCHID, our electronic health record, will start on November 1, 2014—the first of the LA County Medical Centers to implement this fully-integrated system.

The bottom line? Residents get outstanding medical education at Harbor-UCLA. But, in addition, our residents develop a camaraderie that comes from encountering challenging clinical experiences and the opportunity to make a difference to our patients, most of whom have no other source of medical care. This Harbor-UCLA makes a lasting impression on its graduates and influences their subsequent professional lives. We hope that you will strongly consider Harbor-UCLA Medical Center for the next phase of your medical career in internal medicine.

Darryl Y. Sue, M.D.
Program Director and Associate Chair, Department
of Medicine, Professor of Medicine

William W. Stringer, M.D.
Chair, Department of Medicine
Professor of Medicine

Mallory D. Witt, M.D.
Associate Program Director, Professor of Medicine

Janine R.E. Vintch, M.D.
Associate Program Director, Professor of Medicine

Dong Chang, M.D.
Associate Program Director
Assistant Professor of Medicine

THE DEPARTMENT OF MEDICINE

The Department of Medicine at Harbor-UCLA has over 60 full-time faculty members who hold faculty appointments at the David Geffen School of Medicine at UCLA. Physician-faculty are appointed to the Professional Staff Association of Harbor-UCLA Medical Center. In addition, the Department's voluntary faculty consists of over 100 practicing physicians from the local community. We have three Chief Residents during 2014-2015 who provide leadership and teaching for 56 residents in the three years of post-graduate internal medicine training. About 50 post-doctoral fellows in internal medicine subspecialties contribute to patient care, as well as teaching residents, interns, and medical students.

The Department of Medicine is responsible for about 150 inpatient beds in Harbor-UCLA Medical Center, including an 8-bed Medical-Respiratory ICU, a 6-bed Coronary Care Unit, 4-8 other ICU beds as needed, about 40 beds in Progressive Care Units, and a Renal Transplant Unit. Ambulatory care is provided in a full range of general internal medicine clinics and subspecialty clinics housed in the Primary Care Center and several other clinic areas. Residents have their own personal continuity clinics and participate in an active Urgent Care Clinic. There are approximately 30 other clinics for internal medicine subspecialty care. The Department of Medicine has more than 8000 admissions to the inpatient services and over 80,000 outpatient visits annually.

Department of Medicine faculty, fellows, researchers, and residents are closely involved in biomedical research. Research facilities in the Department of Medicine are dedicated to molecular and cell biology, animal research, and clinical studies. Examples of research now in progress range from studies of central nervous system control of hormonal secretion; regulation of metabolism; cardiopulmonary physiology during exercise; diagnosis and prediction of coronary artery disease; pulmonary hypertension; physiology, biochemistry, pathophysiology and mechanisms of actions of polypeptide and steroid hormones; immunologic factors in glomerulonephritis and collagen disease; treatment of hypertension; nutrition in renal failure; endoscopic ultrasound; gastrointestinal motility; polymorphism of gastric enzymes; pathophysiology and treatment of chronic obstructive lung disease; health services research; aspects of reproductive physiology; and management of patients with HIV infection.

Textbooks and other reference material are available in the Department of Medicine library, which is readily accessible to residents within the hospital. The Department of Medicine also has a Medical Informatics facility for resident computer access. Residents use the computers for preparing outlines and handouts, preparing slides for presentations, searching the medical literature, and accessing other Internet and CD-ROM resources, including "Up-to-Date." The Harbor-UCLA Medical Center's A.F. Parlow Library provides a full range of textbooks, journals, reference materials, photocopying, and electronic references.

For up-to-date information on the Department of Medicine at Harbor-UCLA Medical Center, check our Web page at:

<http://harbor-ucla.org/>

Select Training Programs from the menu, and choose Internal Medicine.

The Department of Medicine Full-Time Faculty, 2014-2015

- William W. Stringer, M.D. Chair; Professor of Medicine
- Darryl Y. Sue, M.D. Program Director; Professor of Medicine
- Mallory D. Witt, M.D. Associate Program Director; Professor of Medicine
- Janine R.E. Vintch, M.D. Associate Program Director; Professor of Medicine
- Dong Chang, M.D. Associate Program Director; Assistant Professor of Medicine
- Kenneth A. Narahara, M.D. Assistant Chair; Professor of Medicine
- Chloe Bryson-Cahn, M.D. Chief Resident
- Anna Morgan, M.D. Chief Resident
- Leslie Oesterich, M.D. Chief Resident

Division of Cardiology

- Kenneth A. Narahara, M.D. Chief; Professor of Medicine
- Matthew Budoff, M.D. Professor of Medicine
- Quang Bui, M.D. Assistant Professor of Medicine
- Jina Chung, M.D., Assistant Professor of Medicine
- J. Michael Criley, M.D. Emeritus Professor of Medicine and Radiology
- William J. French, M.D. Professor of Medicine
- Mark Girsky, M.D. Associate Professor of Medicine
- Ivan Ho, M.D. Assistant Professor of Medicine
- Charles R. McKay, M.D. Professor of Medicine
- Ronald Oudiz, M.D. Professor of Medicine
- Priya Pillutla, M.D. Assistant Professor of Medicine
- Sonia Shah, M.D. Assistant Professor of Medicine
- Joseph Thomas, M.D. Assistant Professor of Medicine

Division of Dermatology

- Ron Birnbaum, M.D. Assistant Professor of Medicine
- Belinda Tan, M.D., Ph.D. Assistant Professor of Medicine

Division of Endocrinology and Metabolism

- Ronald S. Swerdloff, M.D. Chief; Professor of Medicine
- Eric P. Brass, M.D., Ph.D. Professor of Medicine
- Andrew Gianoukakis, M.D. Professor of Medicine
- Eli Ipp, M.D. Professor of Medicine
- Peter Yiwen Liu, MBBS, Ph.D. Professor of Medicine
- Christina C.L. Wang, M.D. Program Director, Clinical Studies Center; Professor of Medicine

Division of Gastroenterology

- Viktor E. Eysselein, M.D. Chief; Professor of Medicine
- Anuj Datta, M.D., Assistant Professor of Medicine
- M. Wayne Fleischman, M.D. Assistant Professor of Medicine
- Sofiya Gukovsky-Reicher, M.D. Associate Professor of Medicine

Division of General Internal Medicine

- Darrell W. Harrington, M.D. Chief; Professor of Medicine
- Peter V. Barrett, M.D. Professor of Medicine
- Bahman Chavoshan, M.D., Assistant Professor of Medicine
- Susan Hsieh, M.D. Associate Professor of Medicine
- Denis Levin, M.D. Associate Professor of Medicine and Department of Family Medicine
- Carmen Mendez, M.D., Assistant Professor of Medicine
- Katayoun Mostafaie, M.D. Associate Professor of Medicine

- Mark T. Munekata, M.D. Associate Professor of Medicine
- Samuel Nam, M.D., Health Sciences Assistant Clinical Professor of Medicine
- Vivek Ramanathan, M.D. Assistant Professor of Medicine
- Arthur P. Richardson, M.D. Assistant Clinical Professor of Medicine
- Linda Sharp, M.D. Assistant Professor of Medicine
- Stacy Tarradath, M.D. Assistant Professor of Medicine
- John A. Tayek, M.D. Professor of Medicine
- Janine R.E. Vintch, M.D. Professor of Medicine
- Katherine Ward, M.D. Associate Professor of Medicine
- Shirley Wu, M.D. Assistant Professor of Medicine

Division of HIV Medicine

- Eric S. Daar, M.D. Chief; Professor of Medicine
- Katya Corado, M.D. Assistant Professor of Medicine
- Mallory D. Witt, M.D. Professor of Medicine

Division of Infectious Diseases

- Scott G. Filler, M.D. Chief; Professor of Medicine
- Arnold S. Bayer, M.D. Professor of Medicine
- John E. Edwards, Jr., Professor of Medicine
- Ashraf Ibrahim, Ph.D. Professor of Medicine
- James McKinnell, M.D. Assistant Professor of Medicine
- Loren Miller, M.D. Professor of Medicine
- Michael Yeaman, Ph.D. Professor of Medicine

Division of Medical Oncology and Hematology

- Rowan T. Chlebowski, M.D., Ph.D. Chief; Professor of Medicine
- Maria Dungo, M.D. Associate Professor of Medicine
- Stewart A. Laidlaw, Ph.D. Professor of Medicine
- Tomoko Tagawa, M.D. Assistant Professor of Medicine
- Kouichi R. Tanaka, M.D. Emeritus Professor of Medicine
- James Yeh, M.D., Assistant Professor of Medicine

Division of Molecular Medicine

- Michael Yeaman, Ph.D. Chief; Professor of Medicine
- Lou Lu, M.D., Ph.D. Professor of Medicine
- Alan Waring, Ph.D. Professor of Medicine

Division of Nephrology and Hypertension

- Sharon G. Adler, M.D. Chief; Professor of Medicine
- Tiane Dai, M.D., PhD Assistant Professor of Medicine
- Ramanath Dukkipati, M.D. Assistant Professor of Medicine
- Joel D. Kopple, M.D. Professor of Medicine and Public Health
- Lilly M. Barba, M.D. Associate Professor of Medicine
- Arthur H. Cohen, M.D. Professor of Pathology and Medicine
- Raimund R. Hirschberg, M.D. Professor of Medicine
- Anuja Shah, M.D. Assistant Professor of Medicine
- Jenny I. Shen, M.D. Assistant Professor of Medicine
- Li-Li Tong, M.D. Assistant Professor of Medicine

Division of Respiratory and Critical Care Physiology and Medicine

- Kathy E. Sietsema, M.D. Chief; Professor of Medicine
- Richard Casaburi, Ph.D., M.D. Professor of Medicine

harbor-ucla medical center
department of medicine

- Dong Chang, M.D. Assistant Professor of Medicine
- James E. Hansen, M.D. Emeritus Professor of Medicine
- David Hsia, M.D., Associate Professor of Medicine
- Gregory R. Mason, M.D. Professor of Medicine
- Janos Porszasz M.D., Ph.D. Professor of Medicine
- Harry Rossiter, Ph.D. Associate Visiting Professor of Medicine
- William W. Stringer, M.D. Professor of Medicine
- Darryl Y. Sue, M.D. Professor of Medicine
- Janine R. E. Vintch, M.D. Professor of Medicine
- Karlman Wasserman, M.D., Ph.D. Emeritus Professor of Medicine

Division of Rheumatology

- George Karpouzas, M.D. Chief; Associate Professor of Medicine
- Gopika Datta Miller, M.D. Assistant Professor of Medicine

The Department of Medicine Residents, 2014-2015

3rd Year Residents	Azzah Arikat	U Illinois
	Christopher Brown	UC Irvine
	Viet Bui	NYU
	Vivian Bui	UC Davis
	Michael Chen	Columbia
	Asher Edwards	Philadelphia Osteopathic
	Chelsey Forbess	NYU
	Joseph Gordon	George Washington
	Matthew Hakimi	UCLA
	Nancy Hsu	UC San Francisco
	Cynthia Huang	UCLA
	John Javien	UC Davis
	Cindy Kim	University of Leeds
	Jonathan Kung	St. Georges'
	Pauline Limchaiyawat	UC San Diego
	Christopher Metchnikoff	UC San Francisco
Carlos Rodriguez	UC Irvine	
Shelley Schwartz	UCLA	
2nd Year Residents	Ehsaan Akhtar	UC Davis
	Xi (Kelsey) Chen	Boston
	Vanessa Correa	UCLA
	Adriel Fajilan	Loma Linda
	Ali Fakhreddine	U Texas Southwestern
	Jennifer Fu	Western U
	Michael Garcia	Maryland
	Marianne Go-Wheeler	Arizona
	Tariq Hashmi	Boston
	Christopher Hom	Meharry
	Connie Huang	Temple
	ChaRandle Jordan	Stanford
	Luke Lam	Hawaii
	Marizabel Orellana	UCLA
	Radhika Prabhakar	Medical College of Georgia
	Benedict Tiong	New York Medical
Arman Yerevanian	Case Western	
1st Year Residents	Frank Brodie (P)	U Penn
	Andrew Cheng	Temple
	Dinora Chinchilla	UC Irvine
	Daniel DaCosta	Rutgers, RWJ
	Sindalana Hean	Med Coll Wisconsin
	Sindalisa Hean	SUNY Downstate
	Duong (Tommy) Hua	Vermont
	Jennifer Ledon (P)	Miami
	Yong (Phillip) Liu	Tulane
	Kevin McGehrin (P)	U Maryland
	Nichelle Megowan	Washington University
	Nilay Patel	U Buffalo
	Charles Pham	SUNY Downstate
	Augustine Pyo	Tufts
	Justin Rheem	Loma Linda
	Li Tao	Case Western
	Ignacio Velaquez	UC Irvine
	Angela Wright	UCLA
	Daniel Wu	St. Louis
Theresa Yang	Albany	
Victoria Yeh	Case Western	

HARBOR-UCLA MEDICAL CENTER

Established in 1947 as Los Angeles County-Harbor General Hospital on the site of the Station Hospital at the Los Angeles Port of Embarkation, the facility then consisted of 72 acres of land and a complex of wooden barracks and trailers. This was the second hospital for the management of acute medical problems to be operated by Los Angeles County and was designed to serve the medically needy of the southern section of the County, covering some 300 square miles. The continued rapid growth in the local population led to the construction of a new hospital facility completed in 1963. The total building space is 1 million square feet, with 50% of the space within the main unit. The name was changed from Harbor General Hospital to Harbor-UCLA Medical Center in 1977 to reflect the ongoing close relationship of the hospital to the UCLA School of Medicine (now the David Geffen School of Medicine at UCLA).

The main hospital is an eight-story building containing 556 licensed available beds. It contains Medical/Surgical wards (348 beds), a Renal Transplant Intensive Care Unit (6 beds), Perinatal Unit (55 beds), Pediatrics (34 beds), Adult Surgical/Medical Intensive Care Units (44 beds), a Neonatal and Pediatric Intensive Care Unit (18 beds), Coronary Care unit (6 beds), and Psychiatry (39 beds). The Medical Center provides comprehensive medical care with complete facilities, including psychiatric, laboratory, diagnostic radiology and imaging (MRI and SPECT), and outpatient services. It is certified as a Level I Trauma Center and designated as a Pediatric Critical Care Center and Pediatric Emergency Department. Opened in 1995, the Edward J. Foley Primary Care and Diagnostic Center is a 53,000 square foot, three-level clinical care facility housing general internal medicine clinics, medicine subspecialty clinics, a Community Health Plan Clinic, Urgent Ambulatory Care Clinic, and areas for outpatient diagnostic procedures and outpatient surgery. In 2006, a new cardiac catheterization laboratory was completed. The Department of Medicine's new ICU opened in July 2011. A new Emergency Room and Operating Room building, a 190,000 square foot addition to the Medical Center, opened in March 2014. A welcome addition has been a parking structure with more than 500 spaces that opened in 2011.



Harbor-UCLA Medical Center is one of the few County hospitals in the country with a strong academic and research base. Despite fiscal constraints occurring at the County, State and Federal levels, Harbor has been able to keep pace and even grow over the recent past in terms of its academic and training base. It has an international reputation for academic excellence and research productivity.

The Harbor-UCLA Medical Center draws on a catchment area of over 4 million residents, with more than half a million who are below the poverty level. This population represents a wide range of income levels, educational levels and ethnicity (Hispanics 39%, Whites 32%, African Americans 15%, Asians/others 14%). In a given year, the hospital has over 24,000 discharges. Outpatient visits number more than 250,000 and emergency room visits near 90,000.



A major feature of the Medical Center is a 53,000 square foot Primary Care and Diagnostic Center (left) which provides space for ambulatory primary care internal medicine and special procedures including endoscopy, pulmonary function testing, outpatient surgery, and cardiac catheterization. A full service Medical Imaging Center offers up-to-date radiological services, including a state-of-the-art Picker 2-Tesla magnetic resonance scanner.

The Medical Center research complex is operated by the Los Angeles Biomedical Research Institute (an entity distinct from Los Angeles County). It includes the Walter P. Martin Research Building, the St. John's Cardiovascular Research Center, the Steve C.K. Liu and Milly Liu Clinical Research Center, the Hanley-Hardison Research Center, other research laboratories for faculty-investigators, and space for clinical investigation. The Chronic Disease Clinical Research Center (below) opened in 2012, with offices and laboratories for clinical research in HIV/AIDS, rehabilitative medicine, atherosclerosis research, and investigational drugs services. A comprehensive master plan for the research campus has been developed.

On November 1, 2014, ORCHID, our integrated electronic health record system, will start. ORCHID is the result of a multi-year effort to upgrade our information infrastructure, train all personnel, and merge all patients within the LA County Department of Health Services system. Harbor-UCLA is the first of the LA County DHS medical centers to implement ORCHID. All medical records documentation, physician orders, laboratory and imaging results, ambulatory clinic notes, and other information are encompassed in ORCHID, along with a number of decision-tools and communication systems.



The 22,000 square foot A.F. Parlow Library of Health Sciences is located adjacent to the hospital. The library provides books, journals, medical reference services, interlibrary information exchange, and computerized medical literature searches for Harbor-UCLA physicians and staff. Faculty and residents can access the Internet from computers in the hospital and the library.

The Harbor-UCLA Medical Center faculty comprises both full-time and voluntary teachers. The full-time faculty includes over 175 physicians who devote 100% of their time to patient care, teaching, and research at Harbor-UCLA Medical Center. All are faculty members of the Geffen School of Medicine at UCLA. Over 900 physicians in private practice volunteer their time to patient care and teaching as members of the Clinical Faculty. The involvement of housestaff with both medical academicians and private practitioners provides exposure to the array of perspectives and to the spectrum of opportunities within medicine today.

THE TRAINING PROGRAM

- CATEGORICAL MEDICINE, POST-GRADUATE YEAR 1 (Intern)

The training program offers a Post-Graduate Year 1 in Categorical Medicine. This is the first postgraduate year of training in our three-year internal medicine program. We are offering 17 positions for 2014-2015. The information describes the *current* program and is subject to change.

1. Rotations

The year is divided into 13 rotations of 4 weeks each:

Weeks	Rotation
20	Inpatient Medicine
4	Inpatient Neurology
4	Medical Intensive Care Unit
4	Cardiology Inpatient/Coronary Care Unit
4	Emergency Medicine
8	General Medicine Clinics
4	Elective
4	Vacation

2. Responsibilities for First-Year Residents

On the inpatient medicine rotations, the first-year resident works under the supervision of a second- or third-year resident and a faculty attending physician, and is responsible for the admission evaluation, orders, medical records, and daily management of his or her patients. Procedures such as lumbar punctures, diagnostic pleural and peritoneal aspirations, central line placement, and proctosigmoidoscopy are performed under the supervision of senior residents and attending physicians. Phlebotomy services are provided by clinical laboratory personnel. Nurse IV teams are available 24 hour per day, seven days a week. Laboratory results and clinical imaging are available on computer terminals located in all patient care areas.

The inpatient medicine rotation strongly emphasizes continuity and the team care approach. Each of the teams consists of an attending physician (full-time faculty member), a second- or third-year residents, and one or two first-year residents. There is often a third year medical student and occasionally a fourth year student on the team. The first-year residents admit patients along with a more senior resident from the team. There is no "overnight" call during this rotation. There is no separate "night float" rotation. Subspecialty expertise is provided by active consultative services representing all subspecialties. Patients admitted to the Medical ICU are followed jointly by the ward team and an ICU consultant team. Predominant responsibility for all patients rests with the attending physician-resident team; final and legal responsibility rests with the attending physician.

Inpatient rotations for the first-year resident also include one month each in the Coronary Care Unit/Inpatient Cardiology and the Medical Intensive Care Unit. These experiences provide exposure to critically ill patients, invasive monitoring, and evaluation and management of complex inpatient problems. The Coronary Care Unit/Inpatient Cardiology rotation is designed to provide an intensive cardiology teaching and patient care experience. Patients with primarily cardiac problems (including those admitted to the CCU) are managed by the Cardiology team under the supervision of faculty from the Division of Cardiology. First-year residents will also have one month of inpatient Neurology. On these inpatient rotations, first-year residents rotate on night-call, but there are no "overnight" shifts during which the resident is here during the days on either side of the night shift.

A Continuing Care Clinic (weekly or more on most rotations), two 4-week General Medicine clinic rotations, and two 2-week blocks of Emergency Medicine form the core of the outpatient experience during the first year. These rotations include Urgent Care Clinic, an experience that provides unique experience in ambulatory medicine. First-year residents will gain skills in outpatient orthopedics, ENT, gynecology and ophthalmology. During clinic the resident assumes responsibility for the complete evaluation of patients new to the clinic, including history, physical examination, and interpretation of laboratory data. Patients evaluated during the clinic rotations are subsequently followed in the resident's own Continuing Care Clinic (continuity experience) in addition to patients discharged by the resident during his or her inpatient rotations. The Continuing Care Clinic consists of a weekly four-hour clinic throughout the three years (except during vacations and Emergency Medicine rotations). The Emergency Medicine rotation includes work in a busy acute care emergency room, and supervision is provided by Emergency Medicine residents and full-time faculty from the Department of Emergency Medicine.

3. Instruction and Supervision

Resident education is provided by close supervision and small group instruction, as well as didactic sessions and conferences. Residents are closely supervised in all aspects of patient care. Attending physicians on inpatient services are jointly responsible for patient management with the resident teams. In addition, teaching rounds focused on developing clinical skills, interpretation of clinical data, and resident education are held several times a week on inpatient rotations. Close supervision and instruction are maintained during the other rotations, including Emergency Medicine, Ambulatory Clinics, CCU, and the ICU.

The core of the didactic program consists of four weekly required conferences: Medical Grand Rounds, Morbidity and Mortality Conference, the Evidence-Based Medicine Lecture and House Staff Discussion Series, and the Primary Care Lecture Series, a weekly core curriculum conference dedicated to primary care topics. Each week there is an "Interns' Report" which offers a unique opportunity for in-depth case discussion and teaching focused directly on first-year residents.

First-year residents have a major role in promoting the educational excellence of the Department. In particular, they have the important responsibility and privilege of teaching medical students on their team. About one-third of the medical students from the David Geffen School of Medicine at UCLA have an internal medicine experience at Harbor-UCLA Medical Center.

4. Stipend, Benefits and Living Conditions

The annual stipend for first-year residents beginning June 2014 was \$44,835. Meals, uniforms, laundering of uniforms, parking, health insurance, professional liability insurance, and disability insurance are provided at no cost. Meals are provided to residents without cost while on duty or on call and available for duty. There are 20 days of vacation time per year. Also, all County employees receive 8 days of sick leave per year accumulated at a rate of 1 day per month to a maximum of 8.

The County of Los Angeles permits Parental Leave. Sick time and vacation time are used for Parental Leave. In compliance with the Family and Medical Leave Act, up to 12 weeks of unpaid leave may be taken as parental leave or to provide care for children, parents, or close relatives. However, the total length of absence may affect the overall duration of the residency training necessary to meet the requirements for certification by the American Board of Internal Medicine or licensure by the State of California.

The County of Los Angeles insures all employees against liability for bodily injury and property damage resulting from actions in the course of duty. This includes malpractice coverage for members of housestaff when they are acting in their official capacity as employees of Los Angeles County. This

coverage includes legal defense and protection against awards from claims reported or filed after completion of graduate medical education if the alleged acts or omissions of the house officer are within the scope of the education program.

There is excellent housing in the immediate vicinity of the hospital. Housing is available at reasonable rates in the surrounding communities. Popular areas within a twenty minute drive from the hospital include Redondo Beach, Palos Verdes, Hermosa Beach, Manhattan Beach, Torrance, San Pedro and Long Beach.

5. Licenses

First-year residents are not required to have a California State Physician's and Surgeon's License, but must obtain a license before mid-way through the PGY2 year if they continue in the program.

6. Internship Application Procedures

All selections for first-year resident positions are made through the National Resident Matching Program (NRMP). The First-year Resident Selection Committee will invite a limited number of applicants to arrange for an interview and to see the facilities at Harbor-UCLA Medical Center. The selection of interns is based upon the following criteria:

- (1) Strong motivation to provide optimal medical care for predominantly medically-underserved patients;
- (2) Performance in college and medical school, not limited to GPA alone;
- (3) Interest and ability in teaching;
- (4) Other activities, such as interests within or outside medicine, including research;
- (5) Personal interview;
- (6) Interest in Harbor-UCLA Medical Center and its particular character and goals.

For the June 2015 starting date, we accept only applications made through ERAS (Electronic Residency Application Service). The deadline for applications is December 1, 2014, but we encourage you to complete and submit your application as soon as possible. Information about ERAS can be found at the Association of American Medical Colleges (AAMC) website: www.aamc.org

• PRELIMINARY MEDICINE, POST-GRADUATE YEAR 1 (Intern)

The Post-Graduate Year 1 in Preliminary Medicine. This is designed as a first postgraduate year of training in internal medicine for those planning specialty medicine careers in radiology, anesthesiology, neurology, dermatology, emergency medicine, and other specialties. We will be offering 4 positions for 2014-2015.

1. Rotations

The year is divided into 13 rotations of 4 weeks each. The schedule is the anticipated schedule for Categorical Medicine residents, but Preliminary Medicine PG1s may request rotations in perioperative medicine, surgery ICU, pediatrics, or other areas depending on career goals, interests, and requirements of the particular future specialty.

Weeks	Rotation
20	Inpatient Medicine
4	Inpatient Neurology
4	Medical Intensive Care Unit
4	Cardiology Inpatient/Coronary Care Unit
4	Emergency Medicine
8	General Medicine Clinics
4	Elective
4	Vacation

2. Responsibilities for First-Year Residents

Responsibilities are the same as for Categorical Medicine residents (see above).

3. Instruction and Supervision

Instruction and supervision are the same as for Categorical Medicine residents (see above).

4. Stipend, Benefits and Living Conditions

The annual stipend for first-year residents beginning June 2014 was \$44,835. Meals, uniforms, laundering of uniforms, parking, health insurance, professional liability insurance, and disability insurance are provided at no cost. Meals are provided to residents without cost while on duty or on call and available for duty. There are 20 days of vacation time per year. Also, all County employees receive 8 days of sick leave per year accumulated at a rate of 1 day per month to a maximum of 8.

The County of Los Angeles permits Parental Leave. Sick time and vacation time are used for Parental Leave. In compliance with the Family and Medical Leave Act, up to 12 weeks of unpaid leave may be taken as parental leave or to provide care for children, parents, or close relatives. However, the total length of absence may affect the overall duration of the residency training necessary to meet the requirements for certification by the American Board of Internal Medicine or licensure by the State of California.

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There is excellent housing in the immediate vicinity of the hospital. Housing is available at reasonable rates in the surrounding communities. Popular areas within a twenty minute drive from the hospital include Redondo Beach, Palos Verdes, Hermosa Beach, Manhattan Beach, Torrance, San Pedro and Long Beach.

5. Licenses

First-year residents are not required to have a California State Physician's and Surgeon's License.

6. Internship Application Procedures

All selections for first-year resident positions are made through the National Resident Matching Program (NRMP). An interview is not offered/required, but many candidates will arrange a visit to see the facilities and meet some of the faculty. For those interviewing for a position in one of the other Departments at Harbor-UCLA, this may be a convenient day for a visit to the Department of Medicine. The selection of interns is based upon the following criteria: (1) Strong motivation to provide optimal medical care for predominantly medically-underserved patients; (2) Performance in college and medical school, not limited to GPA alone; (3) Interest and ability in teaching; (4) Other activities, such as interests within or outside medicine, including research; (5) Interest in Harbor-UCLA Medical Center and its particular character and goals.

The deadline for applications for Preliminary Medicine is December 1, 2014 for the June 2015 starting date. We will accept only applications made through ERAS (Electronic Residency Application Service). Information about ERAS can be found at the Association of American Medical Colleges (AAMC) website: www.aamc.org

• THE RESIDENCY PROGRAM IN MEDICINE (Second and Third Postgraduate Years)

1. Accreditation

The Internal Medicine Residency Program at Harbor-UCLA Medical Center is fully accredited for three years of training by the Accreditation Council for Graduate Medical Education.

2. Selection

Second- and third-year resident positions in medicine (post-graduate years two and three) are filled by the first-year categorical medicine residents continuing in the program. Open positions, if any, are filled by residents selected from qualified physicians, with emphasis placed on performance during internship and residency, academic ability and background, teaching ability and interpersonal relationships.

3. Goals and Objectives

The training program emphasizes the development of well-rounded internists prepared for a career in general internal medicine or subspecialty internal medicine. Each resident rotates on several blocks of inpatient general medicine each year, through a variety of medical subspecialty services during the two years of training, and on a number of general internal medicine rotations that include inpatient consultation, ambulatory care clinics, and managed care. On the inpatient services, the teaching program gives broad and intensive patient care responsibility to the resident team. Residents on inpatient rotations are expected to work effectively with appropriate supervision, but also to know when to seek additional guidance from the faculty. Subspecialty consultation services give residents the opportunity to acquire in-depth knowledge of subspecialty medicine and learn to become effective consultants. The general internal medicine rotations focus primarily on outpatient medicine, including geriatrics, managed care, and ambulatory procedural skills.

After completion of residency, many residents have entered practice in general internal medicine. Others have elected fellowship training at excellent general internal medicine or subspecialty training programs throughout the U.S. or have chosen to continue training at Harbor-UCLA Medical Center.

4. Schedules

There is some flexibility in scheduling, but the second-year residency program generally includes four months on inpatient medicine (one at the UCLA Center for the Health Sciences in Westwood), one in the General Medicine Clinic, one in Urgent Care Clinic, four medical subspecialty rotation months, one elective month, one quality improvement month, and four weeks of vacation (13 rotations of 4 weeks each). The third-year residency program places additional emphasis on in-depth training in various subspecialties and general internal medicine. Most third-year residents will have three months assignment on inpatient medicine and one month on inpatient cardiology. Four months are spent on medical subspecialty rotations, one month as a general medical consult to non-medicine services, one month in ambulatory managed care, one month in subspecialty medicine ambulatory clinics, one month in emergency medicine, and four weeks vacation (13 rotations of 4 weeks each). A range of elective rotations is offered, including evidence-based medicine, critical care medicine, and research, and residents may design their

own elective rotation subject to approval. The schedule is sufficiently flexible to allow up to three months of research during the residency for highly-motivated residents. A sample schedule is as follows:

Second-year Resident (Post-Graduate Year 2)

Weeks	Rotation
16	Inpatient Medicine Wards (including 1 month at UCLA Center for the Health Sciences)
4	General Medicine Clinic
4	General Medicine/Urgent Care Clinic
4	Quality Assurance and Improvement
4	Nephrology and Hypertension
4	Infectious Diseases
4	Pulmonary Medicine
4	Cardiology
4	Elective
4	Vacation

Third-year Resident (Post-Graduate Year 3)

Weeks	Rotation
12	Inpatient Medicine Wards
4	Inpatient Cardiology/CCU
4	General Medicine Inpatient Consultation
4	General Medicine/Ambulatory Managed Care
4	Gastroenterology
4	Endocrinology and Metabolism
4	Rheumatology
4	HIV Medicine
4	Elective
4	Vacation

5. Responsibilities

Residents on inpatient medicine are responsible for the complete work-up and management of patients; guidance, teaching and supervision of first-year residents and medical students; procurement of consultations; and the overall administration. Patients in the Intensive Care Unit remain under the aegis of the resident team in consultation with the ICU team. Formal teaching attending rounds are held for two hours at least three times per week, as well as daily work rounds with the attending physician, ensuring that every patient is adequately reviewed and residents appropriately supervised.

Residents on inpatient medicine attend Morning Report four days per week. This conference, moderated by the Department Chair, Associate Chair, or other faculty member, is an interactive discussion of selected patients intended to develop skills in differential diagnosis, initial approach to management, and interpretation of clinical data. Residents are required to attend the weekly Medical Grand Rounds, Medical Morbidity and Mortality Conference, the Evidence-Based Medicine and House Staff Discussion Series, and the Primary Care Lecture Series. A number of other conferences are held approximately monthly, including the Medical Informatics Discussion Series, Journal Club, and Ethics Conference.

Each resident has his or her own Continuing Care Clinic scheduled 1-3 times/week. These clinics allow residents to see patients initially evaluated during the General Medical Clinic rotation, patients discharged

by the resident from inpatient medicine, and a group of patients assigned from a graduating senior resident.

Residents rotating onto medical subspecialties function as consultants to the medicine inpatient services and to non-medical services (e.g., Surgery, OB/Gyn, Psychiatry). They are responsible for attending the major Department of Medicine conferences as well as their own subspecialty clinics, rounds and conferences. The General Medicine Consult resident provides consultations for patients with medical problems on non-medical services, including perioperative evaluation and management.

6. Instruction and Supervision

The attending physician and full-time staff provide direct supervision and instruction during lectures, rounds, clinics and conferences. All of the attending physicians assigned to inpatient medicine are full-time faculty members. The subspecialty consultative services are supervised by faculty physicians (95% full-time) who maintain close daily supervision of the residents assigned to their services.

7. Research

There are many options for resident participation in the active research programs within the Department of Medicine. Residents have worked under the direction of faculty members in all areas of internal medicine, and have been involved with both basic science and clinical research projects. Residents who participate in research are encouraged to present their research at local and national meetings.

8. Stipend, Benefits, and Living Conditions. The yearly stipends starting July 2014 were:

PGY-2 \$50,160

PGY-3 \$54,349

Meals, uniforms, uniform laundry, parking, health insurance, disability insurance, and professional liability insurance currently are provided at no cost. (See Benefits provided for Interns.) Housing is available at reasonable rates in the surrounding communities. Popular areas within a twenty minute drive from the hospital include Redondo Beach, Palos Verdes, Hermosa Beach, Manhattan Beach, Torrance, San Pedro and Long Beach.

9. Licenses

Appointees will be required to present a California State Physician's and Surgeon's Certificate at the time of appointment or a letter acknowledging registration with the California State Board of Medical Examiners. Residents are required by California State Law to have a valid license before the start of their twenty-fifth month of post-graduate training, regardless of the location or specialty of prior training. Appointees are also required to obtain a DEA number. Residents must obtain Advanced Cardiac Life Support (ACLS) certification during their second-postgraduate year.

10. Residency Application Procedure

The number of positions available for second- or third-year residents coming from outside our PGY1 Categorical program is usually very limited, and, for most years, there are no such positions at all. A physician interested in beginning residency training at the PGY2-3 level should contact the program directly for more current information.

• FELLOWSHIPS

Fellowships for physicians desiring additional training in subspecialty medicine after residency emphasize clinical work, research, or a combination of both. Those fellowships available through the Department of Medicine include the following subspecialties:

- Cardiology
- Endocrinology, Metabolism and Nutrition
- Gastroenterology*
- General Internal Medicine
- Geriatrics*
- Hematology and Medical Oncology
- Infectious Diseases
- Nephrology and Hypertension
- Pulmonary Disease and Critical Care Medicine
- Rheumatology*

*Fellowships in Gastroenterology, Geriatrics, and Rheumatology are based at the UCLA Center for the Health Sciences.

Candidates are requested to write to the Chief of the Division (as listed under "Full Time Faculty") for specific information about the fellowship program desired. Additional information may be found at the Department of Medicine webpage: <http://harbor-ucla.org/>

DEPARTMENT OF MEDICINE TEACHING CONFERENCES (Partial Schedule)

MONDAY

- 9:00 a.m. Morning Report
- 12:00 Noon Evidence-Based Medicine House Staff Discussion Series
- 4:00 p.m. Gastroenterology Seminar

TUESDAY

- 8:30 a.m. Medical Grand Rounds
- 12:00 Noon Ethics Conference/Journal Club/Special Residents' Topics
- 12:00 Noon ECG Conference
- 1:30 p.m. Medical Oncology Conference
- 4:00 p.m. Multi-disciplinary Chest Conference

WEDNESDAY

- 9:00 a.m. Morning Report
- 12:00 Noon Respiratory/Critical Care Medicine Grand Rounds
- 12:00 Noon Primary Care Lecture Series
- 12:00 Noon Endocrinology Conference
- 12:00 Noon Tumor Board
- 1:30 p.m. Medical-Surgical G.I. Conference
- 3:30 p.m. Cardiac Advisory Board

THURSDAY

- 9:00 a.m. Morning Report
- 12:00 Noon Medical Morbidity & Mortality Conference
- 1:30 p.m. Nephrology & Hypertension Grand Rounds
- 1:30 p.m. Combined Medicine-Pediatrics Hematology Conference

FRIDAY

- 9:00 a.m. Morning Report
- 12:00 Noon Infectious Disease Grand Rounds
- 12:00 Noon Interns' Report
- 12:00 Noon Board Review
- 1:30 p.m. Endocrinology Grand Rounds, Medicine-Pediatrics

There are many other subspecialty clinical and research conferences and consultation rounds that are too numerous to be individually listed. For example, each subspecialty has an organized teaching program consisting of rounds, conferences, x-ray review sessions, and seminars.

RECREATIONAL, CULTURAL AND SOCIAL OPPORTUNITIES

Harbor-UCLA Medical Center is located in one of the best parts of the Los Angeles Area, the "South Bay," which is well known for the quality of air and weather, close to excellent beaches, and more moderate temperatures and less congestion than other parts of Southern California. We're only 20 miles south of downtown Los Angeles and close to the freeways. The South Bay communities of Torrance, Redondo Beach, Gardena, San Pedro, Long Beach, Palos Verdes Peninsula, Manhattan Beach, and Lomita are mostly residential, but have a mix of high-tech industry, light industry, transportation, retail sales, and other businesses. The nearby Ports of Los Angeles and Long Beach have the heaviest volume of cargo traffic in the U.S. There is a notable Pacific Rim flavor to the area as the U.S. headquarters of Honda, Toyota, and many other Asian-Pacific companies are located within a few miles of Harbor-UCLA.

The excellent year-round climate and proximity of mountains and ocean combine to provide Los Angeles area residents with unique recreational opportunities. The nearest beach is only 15 minutes from the hospital. Ski resorts are only two to three hours by car from Harbor-UCLA Medical Center and good snow for skiing is available about four months of the year. Facilities for sailing, golf, tennis, and diving are available. There are several internationally-famous marathon races and bicycling events every year. Major shopping complexes are minutes away, as well as restaurants of every kind.

Every conceivable form of entertainment and cultural enrichment is readily available in Southern California. The downtown Music Center provides the city with a complex of magnificent halls for opera, symphony, dance, and drama, including the Walt Disney Concert Hall, a state-of-the-art concert venue. The famous Hollywood Bowl, the largest outdoor music theater in America, offers a popular summer program of symphonies and concerts. The spectacular Getty Museum in West Los Angeles gives the area another world-class art museum. Other major collections include the Los Angeles County Museum of Art, Museum of Contemporary Art, UCLA Hammer Museum, the Norton Simon Museum, and the Huntington Library. The California Science Center in Exposition Park has the space shuttle Endeavor on display, and the battleship USS Iowa is docked as a museum ship nearby in San Pedro Harbor. There are more than 20 universities and colleges in the Los Angeles metropolitan area that provide educational, cultural and social activities of wide variety and interest. Southern California has major professional teams in baseball, basketball, soccer, and hockey, and hosts numerous major collegiate sports events, including those at UCLA and USC. Of course, the Los Angeles Kings won the Stanley Cup in 2012 and 2014! Professional football may even return someday, but apparently not in the near future.

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