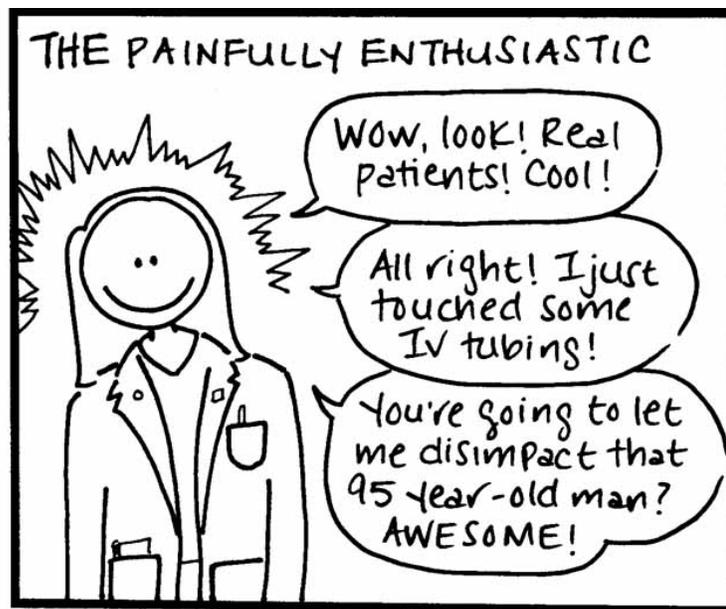


A Survival Guide



For the Third Year Medical Student

University of Pittsburgh School of Medicine

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I. Welcome to the clinical years!

Now that you have survived the boards and enough lectures to test your stamina, you have made it to the best part of medical school. This guide is intended to provide you with some resources and information that we wished we were armed with when we started rotations. Inside you will find a brief synopsis of the required clerkships including information on call and weekend schedules, as well as information to help you navigate the hospital system.

We hope it helps! Enjoy your third year!

II. General Information

A. Shelf Exams – Shelf exams are standardized exams given to all medical students in the country at the end of most clerkships. At Pitt, Medicine, Surgery, and the Clinical Neurosciences (Psychiatry and Neurology) all have shelf exams. These are 100 question multiple choice exams that are timed (2hrs10min). Your score is calculated based on the performance of all medical students in the US. The vignettes are very long, so practice finding pertinent information. Questions progressively get longer, and by the end of the exam you may have matching (a-q) with ½ page vignettes.

B. Parking – Free parking is available at Shadyside and St. Margaret's Hospitals. Limited free parking is also available to students doing medicine or surgery (clerkships or AI's) at the VA (apply through the Zone or Mrs. Harlow before your rotation starts). We are working hard to secure more free and discounted parking, so we encourage people to use it and show that the students have a need. An OC Lot parking permit can be obtained (for more info, go to <http://www.pts.pitt.edu>), otherwise the daily flat rate is \$7. Parking at Magee costs \$6/day and is located at the 2nd Avenue lot. Shuttles run every 30 minutes from the lot to the hospital.

C. Free Food – Meal tickets are given for rotations at Shadyside Hospital. Students on *Medicine* can get free lunch most days of the week at noon conferences and breakfast at Friday Grand Rounds (GR). There are usually no lunches on Surgery, Peds, or OB/Gyn. *CAMPC* students can get lunch at the Peds resident conference. On *Peds*, there is breakfast at Thursday GR, and lunch at Thursday GR for *Psych. FM* or *ENT* students at St. Margaret's can receive meals at Monday journal club or Thursday GR. Drug lunches vary by location and doctors' wishes (e.g., on outpatient neuro).

D. Dining options you have to pay for...

- a. *Presby* – 11th floor Scaifeteria, small breakfast/lunch nook at the bottom of the escalator on the way to Falk.
- b. *Children's* – Cafeteria on basement floor, the Pop Stop on 1st floor (great milk shakes).
- c. *Monte* – Cafeteria on 4th floor, 7 Main Café (on 7 Main, obviously), coffee cart near the 7 Main entrance.
- d. *Magee* – Cafeteria on 1st floor, café in 1st floor gift shop
- e. *VA* – Cafeteria on ground floor, coffee cart on 1st floor.
- f. *Shadyside* – Cafeteria and West End café on 1st floor, another café in Hillman directly over bridge (2nd floor).
- g. *St. Margaret's* – Cafeteria on ground floor.
- h. *WPIC* – Cafeteria on the 4th floor.

E. Scrub Machines – Each hospital has their own scrubs and they are particular about students dressing appropriately. Presby and Monte use dark blue scrubs; all others use light blue. The hospitals are strict about giving out scrubs because they lose so much money in those that aren't returned. You can get one pair out at a time at Magee and two pair at each of the other hospitals. **Warning:** Some of the scrub machines take a picture of what is being returned and link it to your ID.

- a. Presby/Monte – Scrub machine is in a room on the 2nd floor of Presby, directly before the entrance to Scaife (on the right, directly before the door to the stairwell). Hangers can be returned in the scrub room or in the locker rooms.
- b. Magee – Scrub machine is located on the 4th floor. When you get off the elevator, immediately turn the corner to the left. The machine is at the end of the hall. You will get a scrub card for OB/Gyn, surgery or anesthesia. If not, one can be obtained on the 3rd floor at the OR control desk.
- c. Shadyside/Children's – Scrubs are located on shelves in the locker rooms, so you can just take your size.
- d. VA – Scrub machine is located inside the OR suite to the left of the main desk.
- e. St. Margaret's – Scrub machine is located inside the locker rooms on the 2nd/main floor.

F. Paging System – There are different paging systems for Presby/Monte/Shadyside and the other UPMC hospitals. Med students all have Presby pagers with a four-digit and a long-range number.

- a. Presby/Monte/Shadyside – dial 7-PAGE (or 412-647-PAGE outside the hospital); the recording will prompt you to enter the pager number and your callback number.
- b. VA – Enter 12 + the pager number. If you are trying to reach a Presby pager, dial 9-412-647-PAGE. All callback numbers begin with 81-ext #.
- c. St. Margaret's/Magee/Children's/WPIC – use long range pager numbers.
- d. Text Paging – Some residents/faculty can receive (and prefer) text pages. You can send a text from any hospital computer by going to <http://1upmc-weboncall>.

F. Main Hospital Numbers:

- a. Presby/Monte: 412-647-2345
- b. Shadyside: 412-623-2121
- c. VA: 412-688-6000 (x ext.)
- d. St. Margaret's: 412-784-4000
- e. Magee: 412-641-1000
- f. Children's: 412-692-5325
- g. WPIC: 412-624-2100

G. Dictations – Dictation is the wonderful art of orally recording patient information into a telephone system for later transcription into a patient’s medical records. In some clerkships you may be asked to dictate H&Ps or discharge summaries. You must first call the UPMC Transcription Service at 412-647-2929 to obtain a dictation code (a three digit number + your short range pager number); you will use this code for the remainder of your time as a student. At WPIC, dictation materials are available in the Medical Records Office (on the 1st floor at the end of the hall). On other rotations, ask your residents about templates or tips that can be used for this sometimes arduous task. And be sure to record the confirmation number for the dictation in the event that your dictation is somehow lost.

H. Computer Access – Computer access to Cerner, the patient info system, should be established by the time you begin your clerkships.

- a. *Children’s* – Your Cerner logon/password is different than the other hospitals, and there is a special Cerner training for Children’s. The Helpdesk number is 412-692-7700.
- b. *VA* – You will receive a logon for general computer access and patient records on the first day of your clerkship.
- c. *All other hospitals* – Logon problems? Call 412-647-HELP.

I. ATM Machines

1. *Presby*: PNC Bank ATM, 11th Floor near Scaifeteria and Citizen's Bank ATM on the bridge between Presby and Falk Clinic (down the escalator from the Presby ED)
2. *Montefiore*: PNC Bank ATM on 7th Floor Main Entrance
3. *Shadyside*: 1st floor Pavilion and near library in Medical Bldg.
4. *Children's*: Citizen's Bank ATM, Basement floor near cafeteria
5. *VA*: ATM Near the main entrance
6. *Magee*: Citizen's Bank ATM on 1st floor near between the Gift Shop/Café and the cafeteria
7. *St. Margaret's*: ATM Machine on 2nd/Main Floor of the hospital

J. Postal Services/Stamps: If you're hard pressed on time and can't make it to the post office, you can send mail and obtain stamps at several locations.

Stamps:

1. At the PNC ATM Machine (Presby 11th Floor by Scaifeteria)
2. On the bridge between the Kaufmann Building (9th floor) and Montefiore (7th floor)
3. On the bridge between Presby and Falk Clinic.

Post Office/Mailboxes:

1. Post Office on the basement floor of the VA.
2. Mailbox on the first floor of the Kaufmann Building.

III. Notes/Prescriptions

You will quickly see what types of notes are required for each clerkship. Daily progress notes are in the SOAP format, and will vary in length and topic depending on the rotation.

A. Prescription Writing

Superscription: Date, Patient Name and Address (required on schedule II scripts), age, and Rx (“take thou”)

Inscription: Name, strength and form of drug

Subscription: Directions to pharmacist (dispense #30, 120ml, etc.)

Transcription or Signatura: Directions for patient, it’s a good habit to use plain English rather than Latin abbreviations, and to write what it is for, but most people don’t (take one tablet daily for blood pressure)

Refills: Fill in for every script, write out so it can’t be altered (“zero” or “Ø” instead of 0 which could be made into 10)

Signature and DEA # for scheduled drugs, medical license number

Controlled Substances

Schedule I: no accepted medical use and high abuse potential – heroin, marijuana, LSD

Schedule II: high abuse potential, no refills, must deliver to pharmacy within 72 hrs – morphine, oxycodone, codeine

Schedule III: lower abuse potential but dependence – vicodin

Schedule IV: lower abuse potential – phenobarbital, diazepam (Valium)

Schedule V: even lower potential – lomotil, Robitussin with codeine

DEA# GB000000 Lic. # ME 0000000

MARTIN R. ROBERTS, M.D.
CHILDREN'S HOME SOCIETY
24 IMPERIAL DRIVE
SELDEN, NY 11784
TEL: (631) 696-4900 FAX: (631) 696-4901

NAME John Doe AGE 55
ADDRESS _____ DATE 1/1/08

R
Lipitor 20 mg tab
Sign. Take 1 tab daily before bed
Disp. Thirty (or #30)

(SIGNATURE)

LABEL
REFILL 0 1 2 3 4 5 PRN

DRS - NAT PRESC T
1-866-696-0800

B. Operative Note

Pre-Op Diagnosis:

Post-Op Dx: often “same”, but not always!

Procedure:

Surgeons: include yourself if you scrubbed in

Findings: R lung mass, etc. often vague as pathology isn’t confirmed yet

Anesthesia: General endotracheal (GETA), spinal, local, etc.

Fluids: LR, NS, blood, etc. Include volumes (anesthesia will have this information)

Estimated Blood Loss (EBL):

Urine Output (UOP): with description if applicable

Drains: if applicable

Specimens: what was sent to pathology

Complications:

Condition: stable, extubated, transferred to recovery room, etc.

C. Postpartum Note – SOAP format

S: patient complaints, include pain, ambulation (OOB), diet, urination (+/- Foley), BMs/flatus, character of post-partum bleeding

O: vitals, exam (heart, lung, abdomen (fundus should be firm and below umbilicus), incision if C-section, extremities

A/P: pain, CV (VSS, Hgb stable), GI (tolerating PO, no N/V/D – nausea, vomiting, or diarrhea), GU (spontaneous voiding, etc.), baby (breast/bottle feeding, circumcision), birth control, disposition

D. Admission Orders

There are lots of mnemonics to help you remember how to write admission orders. They include ADC VANDALISM, ADC VAN DISMAL, or the 6 D's (disposition, diagnosis (dx), diet, diagnostics, drugs, danger).

Here's the general idea:

Admit: floor, room (if you know it), service, attending

Diagnosis: in order of priority

Condition: stable, good, fair, poor

Vitals: routine, q shift (aka every 8 hours), q4hours

Allergies: NKDA, or name allergy AND reaction (e.g., hives, anaphylaxis)

Nursing: I/O's, daily weights, Foley, O₂ requirement, wound care

Diet: regular, ADA, soft, renal, NPO

IV Fluids: NS at 100cc/hr

Special studies: CXR, Head CT

Medications: name, dose, route, schedule

Activity: ad lib, OOB to chair (out of bed)

Labs: CBC with diff, BMP, Ca, Mg, Phos

Can add "danger" or Call H.O. if: systolic BP >200, HR >150, etc.

IV. White Coat Essentials

This varies for each rotation, but as a general rule, always have pens, a pen light, stethoscope, Maxwell's, drug reference (e.g., Tarascon Pharmacopoeia or your palm with Epocrates software), a Sanford guide to Antimicrobial Therapy or the UPMC version, a granola bar, and copies of notes on your patients.

On *Medicine*, it is helpful to have more equipment, such as a reflex hammer, oto/ophthalmoscope (not readily available except at Children's), tuning fork, safety pins (for neuro exams), alcohol wipes, and Guaiac cards, lube, and developer. Most people also like having a pocket text, such as Pocket Medicine or Ferri's, for quick reference.

On *Surgery*, carry tape, scissors or trauma shears, alcohol wipes. Try to anticipate what you will need each day. For example, if you know you have a patient who will need staples or sutures removed, try to find a kit before rounds so you are ready.

V. Clerkships

- A. Medicine – An 8-week rotation consisting of two 4-week blocks at two different hospitals. Your task is to “work up” patients with an initial H&P and then follow them daily. There is also an intern assigned to each patient but they are primarily your responsibility. Students generally carry 2-3 patients.

Services: VA, Monte, Shadyside (with an option to do the Geriatrics Service at Montefiore or Shadyside).

Hours: Generally 7 am until 5-7pm – varies by service and day to day.

Weekends: Expect to work one day of each weekend.

Call: No overnight call.

Short call (S): Your team admits 2 patients,

Intermediate call (I): Your team admits 4 patients

Long call (L): Your team admits 7 patients, mostly in the late afternoon and overnight.

1. Monte – schedule: S → I → pre → L → post. (*except Geriatrics - admits 3 on weekdays and 2 on weekend days*)

2.. VA/ Shadyside only have short and long call, so your team admits 4 (S) or 7 (L) patients on a “post → S → pre → L” schedule.

Lockers: Provided at Shadyside and at Monte (bring your own lock). Each team has its own room at the VA.

Medicine (continued)

Reading: Harrison's or Up To Date, Pocket Medicine or Washington Manual, Case Files, Blueprints, MKSAP. Basically just try to figure out what you would actually read and read it. Do not only read about your patients, but others as well to expand your knowledge base.

Hints: (1) MKSAP is essential for test prep. (2) If you do not dial-up through the university and do not have HSLs access, it is helpful to send yourself an article with a free 30-day trial of Up To Date. If you have 2 email addresses, you can do this twice. That way you can use Up To Date from home for the clerkship.

- B. Surgery and Perioperative Care – an 8-week rotation, with 3 weeks on two surgical services and 2 weeks of anesthesiology. Huge variability depending on the service.
- Services:** Endocrine/Trauma, Thoracic/Trauma, Minimally Invasive (MIS)/GI, St. Margaret's (General/Vascular), VA (General/Vascular), Transplant (Kidney or Liver)/GI, Pediatric/Vascular
- Hours:** Anesthesia usually 7 am to 3 pm, except on WISER session days (4 pm). Expect long hours on surgery with a typical day from 5:00 am until 6 pm.
- Weekends:** Student case conferences from 8-10 am on Saturdays. Clinical duties vary, but expect one weekend day off per week. Weekends are off for anesthesia.
- Call:** Expect q4-5 shifts per surgery service. Usually overnight call (may get out early), and sleep time varies. No call for anesthesia. No call the week of the exam.
- Trauma Call:** All students required to do at least one trauma call, even if you aren't on the trauma service. Trauma students will do 4-6 trauma calls.
- Lockers:** You are given a locker either in Monte or Presby. You may need to provide your own lock for Presby lockers; there are lockers set aside for GI/Transplant students at Monte.

Surgery and Perioperative Care (continued)

Reading: Lawrence Essentials of Surgery, Netter, Surgical Recall, Case Files, A&L Surgery, First Aid for the Wards.

Hints: (1) If you are on a large team (such as trauma), try to scrub in consistently with a few people so they get to know you and can give better evaluations of your performance. (2) Use Recall or Netter to review pertinent anatomy/facts right before a case begins. (3) If there is something that you can't find in the operating rooms – look to the OR Control Desk for answers – they can usually help you!

- C. Clinical Neurosciences – Psych consists of a 5-week inpatient rotation one of five services at WPIC or South Side Hospital. If you are working at WPIC, you will receive a key at the beginning of the rotation which will get you into and out of the units. Most students will carry 2-3 patients. Neurology consists of 3 weeks of inpatient or outpatient clinic. Last half of the alphabet will do Neurology first.
- Services:** Psych: Adolescent Partial, Schizophrenia, Dual Diagnosis Unit, General Adult, or Geriatrics.
 Neuro: Stroke/General, Peds Neuro, or outpatient clinic.
- Hours:** Generally begins 8 am and varies for each service, with some students done as early as 3pm and as late as 7pm.
- Weekends:** Off
- Call:** None.
- Reading:** Andreson’s Intro to Psychiatry and Kaplan & Sadock’s Study Guide (both in WPIC library), Pre-Test Psychiatry and Neuro Neurology, Blueprints Neuro.
- Hints:** (1) Start doing questions and reviewing for the two shelf exams early – the time on this clerkship goes quickly! (2) Take advantage of opportunities to visit Mayview State Hospital and observe neurosurgeries.

D. CAMPC – an 8 week rotation, 4 weeks of pediatrics, 4 weeks of adult outpatient medicine. Peds is divided into one or two week slots, which may include Newborn Nursery, Acute Concerns (ACS), Faculty Teaching (general peds clinic), Weight Management, Adolescent, Student Health, or Satellite clinics. The adult portion is usually four weeks in a doctor's office or student health service.

Hours: Vary. Normally 8 to 5, but ACS has evening shifts from 5-9pm. Newborn Nursery starts at 7 am.

Weekends: Off.

Call: None.

Reading: General textbooks for medicine and pediatrics

Hints: There is a multiple choice and an OSCE portion to the exam. Lectures are in different buildings for pediatric and adult medicine, so check your email.

- E. OB/GYN – A four week clerkship, divided into outpatient clinics, labor and delivery (L&D), and gynecological surgery. The structure has shifted a few times, so you might have 6 days on each, or be required to do a week of days and a week of nights on L&D. If this isn't required, you have the choice of days or nights for L&D. There are several clinics for routine OB, high risk OB, acute gynecology, and procedures. Surgical services include private or university gynecology or gynecological oncology.

Hours:

Outpatient Clinics – 8 am to 4 pm

L&D – 5:30 am to 4 pm (start depends on patient load)

Surgery – 5:30 am to 4 pm (later starts for private services)

PBL – daily from 4 to 6 pm (end time varies)

Weekends: Off.

Call: None.

Lockers: You are given a locker at Magee.

Reading: Blueprints, Case Files, OB/GYN for Med Students (available in Magee's Library on the 1st floor).

Hint: Self-administered evaluation cards - hand them out liberally. Multiple choice/short essay exam, mostly based on learning objectives. It generally takes a long time to get your grade (up to six months)!

- F. Pediatrics – a four week clerkship, divided into two 2-week blocks. You may rotate through the Red or Blue teams (General Peds), Limited Stay Unit (LSU), Adolescent Medicine, or Pediatric Oncology.
- Hours:** Most people arrive between 6:30 and 7am. Signout is normally around 4pm.
- Weekends:** You will have call shifts on the weekend. Each student usually has 2 weekend days, with hours roughly 8-6 (although most get out early).
- Call:** You will take call approximately q4 days depending on the number of med students on your team. Call begins when the regular day is finished and will last until 10 pm. You are usually able to leave after you have admitted one patient.
- Lockers:** You can use a small locker in the residents' lounge. Locks are not provided.
- Reading:** Nelson's or Rudolph's textbooks (HSLs online), blueprints, Appleton & Lange (A&L) Review of Pediatrics, Pediatrics in Review journal also is concise and easy to read on many topics (HSLs online), Case Files: Pediatrics.
- Hint:** A&L is a great source of practice questions for the exam.

- G. Family Medicine – A four week clerkship at a FM office in the city or beyond (Altoona, Latrobe, McKeesport, etc.). You might be split between sites, depending on their hours. You may also round at Magee a few times, spend a half day in the labor suite, or shadow a podiatrist. You must also perform a home visit with one of your patients. Students in the October and April periods are eligible to spend half of their clerkship time in San Jose, Honduras with Dr. Markel (of UPMC McKeesport).

Hours: Usually 8-5:30.

Weekends: Off.

Call: None.

Reading: Essentials of Family Medicine, medicine and pediatrics textbooks, articles on FM Zone page or given out on the first day of the clerkship.

Hint: (1) Update your patient logs daily! Your preceptors for the day must sign off on them, so don't wait until the last minute to complete them. (2) Schedule your home visit early so that you are not scrambling to get your paper done. (3) Read the articles carefully for the exam!

H. Surgical Subspecialties – A four week clerkship, consists of 1 week each of ENT (VA or St. Margaret's), Ophthalmology, Peds ED, and Adult ED.

Hours: ENT and Ophthalmology are usually 8-5. ED shifts are between 8 and 12 hours long. Expect a mix of day and evening shifts (8a-6p, 5p-1a, 10p-7a, etc).

Weekends: You do not have weekend responsibilities for ENT or ophthalmology, but you will likely be assigned to at least one ED shift on the weekend. These shifts may even fall *after* the course exam so be warned that you might not have this weekend off! Each student normally has 4 shifts for each ED portion, so if you have a weekend shift, you will have time off during the week.

Call: You will take call one evening in Ophthalmology, normally finished between 9 and 11pm. You also have the option to stay overnight and leave post-call the next day.

Reading: Primary Care Otolaryngology & Basic Ophthalmology (provided during clerkship), lecture notes.

Hint: (1) Check your email regularly as your schedule is sent in several files and the lectures and workshops are easy to miss. (2) Lectures are usually at 7am two days a week, plus one day of workshops from 8am-Noon. (3) Ophthalmology is represented heavily on final exam, which is composed of multiple choice and short answer.

VI. Unsolicited Advice

1. ***Know your patients*** – We can't stress this enough, it is essential for the medical student to be the most knowledgeable about the medical history and management of one's patients. This can be challenging, as the resident is often called when things change, not you. Check with them before you present a patient to make sure you have the most up-to-date info. Try to present from memory, but have your notes in your hand in case you need them. Memorizing is impressive, but having to scramble for a lab value tucked away in your pocket is not. It is also important to know what to present. For example, a social history should include tobacco, drugs and alcohol, and anything else pertinent. You don't have to tell your attending they have 3 grown children and like gardening in your presentation, but know if they should ask you.
2. ***Know about the diseases your patient has*** – if they present with rule out endocarditis, know Duke's criteria. If they present with pneumonia and happen to have SLE, know the criteria for lupus.
3. ***Ask what is expected of you*** – you will be upset if you find out at the end of 4 or 8 weeks that your grade/learning suffered because you didn't do what was expected. Just ask your residents and attendings about what is expected of you (e.g., notes, presentations), as well as your role in patient care.

4. ***Don't lie.*** No one ever thinks they will, but it can be tempting to say “lungs clear to auscultation” if they were yesterday, or to say H&H is normal if you think you checked Cerner and didn't see any values in the red. It is safer to say “I'm not sure” or “I'll check” in case you are wrong.
5. ***Carry extra pens and more equipment than you think you'll need.*** Attendings don't often carry reflex hammers because they expect you to have one.
6. ***Take your time*** – particularly with inpatient rotations. You may feel pressured to present a new patient before you have had time to think about their case or to sleep a little longer in the morning and spend less time pre-rounding. Resist the urge. If you think of something else after you leave their room, go back and find out. They aren't in the hospital for alone time, they are there to get better, and a thorough H&P will help get them there.
7. ***Don't make any assumptions about a patient.*** You are their student doctor and you now have the right to ask “why” to everything. Don't assume you know why they started drinking again or need dialysis in the home. Their answers are often very different than you would expect. You do them and yourself an injustice if you don't ask.
8. ***Stay organized.*** Some people like outlines of an H&P to carry for each patient. Check out <http://www.medfools.com>

(go to downloads → scutsheets available for medicine, peds, and ob/gyn) for a sample. Other people like to keep an index card on each patient with the trend in pertinent lab values and a list of all their meds.

9. ***Be proactive.*** The more you act like an intern, the better you will do, and the more you will learn. Call consults early in the day and follow-up so you know what the plan is. Check with the nurse about overnight events. If you are waiting on a lab, check with the nurse to make sure it was drawn, and if it was, call the lab.
10. ***Ask questions.*** If your team is debating the likelihood that your patient has SBP and you don't know what it is, ask! You'll get much more out of the discussion, and maybe even earn points for being able to contribute if you know what is going on.
11. ***If your resident tells you to go home, go home!*** You don't look like a hard worker, you look like you don't have a life. They remember what it is like to be a student, so thank them by leaving!
12. ***Talk to upperclassmen.*** Although they are a great source of information, it is ultimately up to you to decide what is best for you and how to make the most out of any experience that you have during the third year. Remember, your only get out of third year what you put into it!

VII. Key Clerkship Locations

Montefiore

Surgery: GI patients on 10East/West, transplant patients on the 12th floor.

Presby

Surgery: Trauma patients on 9th and 10th floors.

Shadyside

Surgery: Operating Rooms on the 2nd floor.

VA

Medicine: Team rooms are on the 5th and 6th floors.

Surgery: Operating Rooms on the 3rd floor.

Children's Hospital

Pediatrics: Red and Blue Teams (mostly 9th floor), LSU (7 South), Adolescent (8 South), Oncology (8 North)

Surgery: Operating Rooms on 6th floor, surgery patients on 10th floor.

St. Margaret's

Surgery: Operating Rooms on the 2nd/Main floor.

Magee

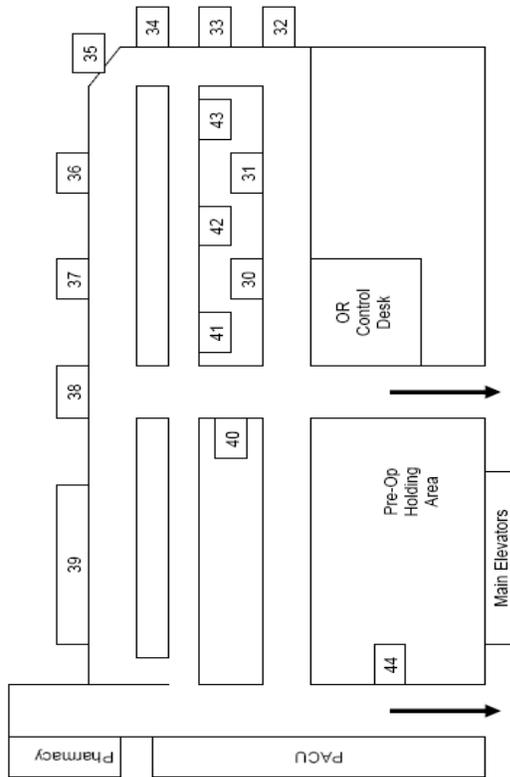
OB/GYN: Labor/Delivery suites on the 2nd floor, Clinics on 0 (Zero).

GYN/Surgery: Operating rooms on the 3rd floor.

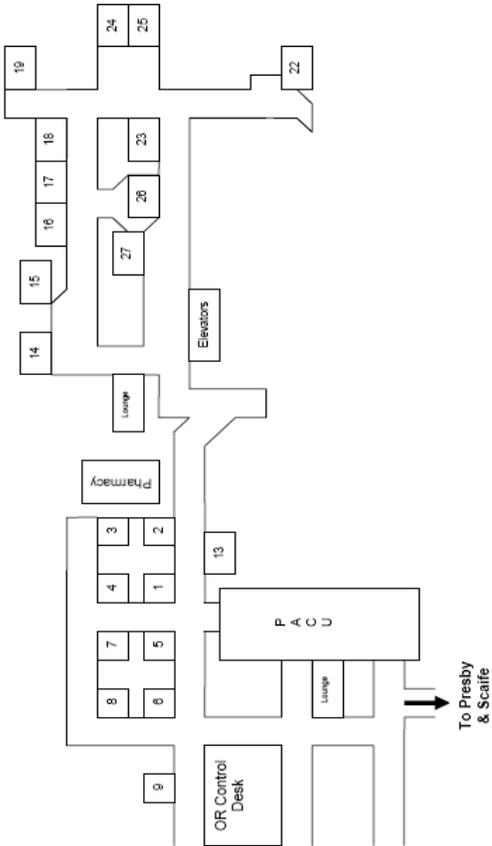
WPIC

Psych: Adolescent Partial (South Side), Schizophrenia (9th Floor), Dual Diagnosis Unit (10th floor), General (11th floor), or Geriatrics (12th floor).

VIII. OR Maps
Montefiore Operating Rooms (5th Floor)



Presby Operating Rooms (2nd Floor)



IX. Acknowledgements

Contributors: This guide was compiled and written by Jamie Evans and Emily Moriarty, Class of 2008.

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