UCLA RR Consults: Fellow to Fellow Guide (updated June 2018)

Pearls:

1. On the first day of the rotation, sign onto the Geriatric consult virtual pager, p87710, by calling the page operator (extension 66766 from any phone).
2. You can sign-on to the Geriatric Virtual pager #87710 online and sign yourself on/off the pager:
   a. https://uclapaging.mednet.ucla.edu/smartweb/
   b. Password: geriatrics
3. Make sure you activate your badge by emailing: Proxcardaccess@mednet.ucla.edu. Include in the email your badge number, the 5 digit “proxy” number on the back of your card, authorizing supervisor (ie: fellowship coordinator), and where you need access.
4. Check either with the charge nurse for new admissions each morning or look at the 4N patient list on “Care Connect” to see if any new patients over the age of 65 were admitted. This way you can start seeing the new patients early as often the interns will not alert you of the admission and will assume you are aware. We auto-consult on all patients >65years who are admitted to the Geriatric Floor on 4N and co-manage their medical conditions with the psychiatry team.
5. Set expectations with the psychiatry intern on communication and who will be taking responsibility of writing orders.
6. Fellows can use Erin Atkinson Cook pre-made template if desired (or make your own). Simply go to the Smart-Phrase manager under the EPIC button in the top left hand corner and search for Erin Atkinson Cook’s smart phrases.
   a. “ErinGeriConsulation” is the initial consultation template
   b. “ErinGericonsult” is the follow-up consult
7. When signing onto care connect, make sure you choose the correct “Hyperspace” environment to ensure you are on an inpatient view screen (MD MED GERIATRICS is an example of an inpatient view context).

Managing the Patient List on Care Connect:

1. It is the responsibility of the fellow to maintain the Geriatric Consult system list on the EPIC-Care Connect computer system.
2. On the first day, copy the Geriatric consult system list to your personal patient list to streamline your rotation
   a. Go to “System Lists” → Consults (Physician RR/NPH Follow up) → Geriatrics Consult
   b. Right Click “Geriatrics Consult” and select “copy system list”
   c. Scroll up to “My Patient List”, right click and select “create my list” (name list whatever you want), then paste the Geriatric consult system list into your list.
   d. FYI: Under “systems lists” is a consult – Physician RR/NPH (new) folder. Medical teams can place a consult electronically for
Geriatrics and this consult request will be in that folder. Unfortunately, the different medical services have not been consistent with electronically placing consults in this folder. Thus, this is not a reliable source. Most services will page you with new consults instead.

3. On the first day, add yourself as a member of the team to each patient on the Geriatric consult system list.
   a. Select all the patients in the system list → right click → click “assign me” and assign yourself as the consult fellow
   b. It is also nice to remove the prior fellow from the team

4. When a new consult is called, make sure you ADD that patient to the consult list
   a. find that patient via the unit system list (usually Units – NPH)
   b. select patient’s name and right click → choose “treatment team” → assign yourself as the consult fellow and assign “Geriatric Consults” as a team to the patient
   c. this will automatically add the patient to Geriatric consult system list

Teaching Opportunities:
1. You are expected to give a lecture once during the rotation to the 4N nurses. Lindsey Becker (Lbecker@meet.ucla.edu) (nursing unit director) or Grace Florentin gflorentin@mednet.ucla.edu (unit nurse) to arrange this. This is usually given during the 3rd week of the rotation at 3pm.
2. You work very closely with the interns on the geriatric psychiatry team

Work Room:
1. There is a psychiatry resident work room on 4N. Enter the first set of secured double doors and the room is located off the lobby BEFORE the second set of secured double doors.
2. Many computers and a place to store your belongings
3. There are call-rooms in the basement if you want some privacy

Types of Patients:
1. Majority of patients are on the Geriatric psychiatry team.
2. The most common diagnoses are severe depression requiring ECT and dementia with uncontrolled behaviors. ECT patients require a pre-op by our service
3. There are a small number of patients in the regular hospital we follow and help manage medical problems and delirium.

Notes:
1. Psychiatry patients require 2-3 notes/week minimum
2. Some psychiatry patients require a daily note
3. It is okay to sign-off of a patient who is medically stable and without active issues or medication adjustments. Communicate this with the psychiatry intern and get permission from your attending.
4. Non-psychiatry patients require a daily note

**Hours:**
1. The rotation is 6 days a week (Monday-Saturday)
2. It is a full day and if there are many consults, you will be staying past 5pm
3. Your continuity clinic day will be a long day
4. Rounds on Saturday are in the morning. You can go home after rounds but if a consult comes in later that day you will be expected to return to the hospital to do the consult