REQUIRED ROTATIONS

FAMILY MEDICINE
First-year residents have a one-month rotation in Ambulatory Family Practice. He/she has approximately 12 patient sessions during the month in order to build his/her core of families they will follow for the next three years. The behavioral science curriculum is introduced and tape reviews occur with the faculty. Introduction to practice management also occurs during this month. The first-year resident has the opportunity to spend several sessions in various community outpatient settings including the County Health Department, the Visiting Nurse Association and a local faith-based health center. Directed ambulatory readings during the month help the resident feel comfortable in dealing with many of the common Family Medicine issues that will be encountered during the year. Call on the Family Medicine Service is from home with a third-year resident as back up. The first-year resident spends one month taking care of "moms and babies" at Albany Medical Center, rounding with a family medicine attending. A month of OB night float also takes place in the PGY-1 year.

In the second year, the resident directs the Family Medicine Inpatient Service at Albany Medical Center for a one-half month rotation. They direct patient management and round on a daily basis with a family medicine attending. Morning report occurs twice per week with the inpatient rounding residents and attendings regarding in-hospital topics. Call on the family medicine service is from home.

In the third year, three months are spent at St. Peter's Hospital managing the Family Medicine/Medicine inpatient services. The third-year resident supervises one family medicine resident in medical management of hospitalized Family Medicine Center patients and general medical service admission patients. A family medicine attending rounds daily with the team. Morning report occurs twice per week by the family medicine faculty and three times per week by the faculty in internal medicine. Call on the family medicine service is from home.

INTERNAL MEDICINE
A first-year resident has five months of internal medicine. Three of these rotations are at St. Peter's Hospital working with a third-year Family Medicine resident. On this rotation, responsibilities include admission, rounding, care of general medicine patients and Family Medicine Center patients. The third-year resident functions as a senior resident overseeing the care given by the first-year resident and assumes a major teaching role. The medicine service consists of one family medicine team. Faculty in internal medicine and in the medicine subspecialties supervises lectures and conferences, teaching rounds and morning report. An internal medicine attending will round daily. Call on the family medicine service is from home.

The other month of internal medicine for first-year residents involves spending one month in the ICU at the Albany Medical Center Hospital on a team of three residents, a senior medicine resident, and a pulmonary (ICU) fellow. The resident is expected to admit, round and provide care for the unit patients. Attending rounds are every morning and often there are afternoon lectures by the fellows as well as a noon medicine conference with lunch. Call while on the MICU rotation is every fourth night. The resident goes home after morning rounds when post call.

In the second year there is a one month outpatient rotation in dermatology. Residents work one-on-one with several community attendings evaluating and treating outpatients. A one month cardiology rotation is included in the second year. The resident will work one-on-one with a community cardiologist in the office. Two weeks of infectious disease consults are included in the third year. Residents on these services take family medicine call from home.

The third-year resident has three months managing the family medicine/medicine inpatient service at St. Peter's Hospital. The third-year resident supervises one family medicine resident in the medical management of hospitalized Family Medicine Center patients and general medical service admission patients as described earlier.

PEDIATRICS
First-year Family Medicine residents have three months of pediatrics. During the first-month rotation, the resident functions at the same level as a pediatric resident. The resident works on a team with a senior pediatric resident and three third year medical students at the Albany
Medical Center Children’s Hospital. The resident is expected to admit, round, and care for general pediatric patients as well as supervise medical students who write all of the progress notes. Educational conferences include attending rounds three times a week, X-ray rounds with a pediatric radiologist daily, daily morning report and noon lectures, and case and E/R conferences. Pediatrics has a night float system. The next resident rotation in Pediatrics is a month combining developmental pediatrics with newborn nursery and pediatric delivery room experience. Residents work with a pediatrician learning developmental pediatric screening of normal, high risk and handicapped children. The resident also spends the morning with a neonatology attending from St. Peter's Hospital going to the delivery room for high-risk deliveries and making rounds in the nurseries. Call on the family medicine service is taken from home. The last rotation of pediatrics during the internship is ambulatory pediatrics. The resident will work with a pediatric attending at a very busy private office. There is no pediatric call during the ambulatory pediatric rotation.

Our second-year residents spend two one-month rotations of pediatrics at St. Peter's Hospital. Our residents run the pediatric service without any other house staff. The resident is expected to admit, evaluate, treat and care for general pediatric patients. In addition, the resident will evaluate children in the Emergency Department to decide on the patient's disposition.

**SURGERY**

Each Family Medicine first-year resident rotates with a private attending general surgeon. The resident rounds on the attending’s inpatient service, assists in the operating room on cases, and evaluates patients in the surgeon's office. The surgeon has a busy practice and enjoys teaching.

In the third year, residents do a one month rotation in a community hospital working one-on-one with a private attending general surgeon. The resident first assists in the operating room, rounds on the inpatient surgery service, evaluates outpatients, and does surgical consults. The resident obtains a wealth of experience in outpatient office procedures including vasectomies, lipoma removal, breast and skin biopsies, laser surgery, cyst removal, and various other office surgical procedures. A month rotation in orthopedics is completed in the second year. The resident works one-on-one with a private orthopedic surgeon in the office where they evaluate patients and do casting, fracture reductions, and intraarticular injections. The resident can, if they wish, also spend some time in the operating room first assisting, in the hospital seeing consults and evaluating patients in the emergency room. In the third year, a month rotation is split among the surgical subspecialties of ophthalmology, urology and otolaryngology. Both rotations are entirely outpatient experiences working one-on-one with a private attending. In each of the above surgical rotations, the resident takes family medicine call from home.

**OB/GYN**

Family Medicine residents have a two-month rotation on the OB service at St. Peters Hospital and/or Albany Medical Center. The resident is expected to help with morning post-partum rounds and supervise medical students. There is a daily conference. Residents learn basic OB care, vaginal deliveries, episiotomies and repairs, post-partum care, and ultrasound. Family Medicine residents function as OB residents. In addition, residents can assist on C-section and high-risk OB if they wish when at St. Peter's Hospital. The resident will have a night float OB rotation when at Albany Medical Center.

A one month gynecology rotation is required of second-year residents. This rotation consists of a variety of outpatient experiences. Residents learn diagnosis and management of gynecological problems, family planning and fertility counseling, colposcopy, management of sexually transmitted diseases and geriatric gynecology.

**EMERGENCY ROOM**

The resident works one-on-one with an emergency room attending providing medical care to the variety of patients presenting to this very busy community emergency room. The resident works forty hours per week and during this rotation family medicine service call is taken from home.

**BEHAVIORAL SCIENCE LONGITUDINAL EXPERIENCE**

A dynamic behavioral science curriculum is integrated throughout the three-year residency experience in a variety of ways. Two full time
clinical social workers are accessible and available for immediate consultations and patient co-counseling. The behavioral science faculty orient incoming residents through an extensive tutorial during the Ambulatory Family Medicine month. They coordinate core curriculum conferences throughout the residency devoted to the recognition and management of psychiatric disorders, psychological components of illness, and family dysfunction. The doctor-patient relationship is explored in all its richness through video tape review of encounters selected by the resident. In addition, a talented family physician shadows second-year residents in their clinical practice providing feedback on the doctor/patient relationship. The behavioral science faculty encourage an open, supportive approach to the psychosocial issues of both residents and their patients. Physician well-being and prevention of physician impairment are also addressed through the lecture series and special workshops.

**ELECTIVES**

Four months of electives allow the resident to tailor his/her residency to his/her needs and interests. Electives are arranged by the resident with the help from their advisor. Some of the popular electives in Albany are cardiology, endocrinology, pulmonary, emergency medicine, and radiology. The resident may take up to two months away from Albany. Some of the popular away electives include Indian Health Service, orthopedics at Hunter Mountain in NY (during ski season), Family Medicine or Obstetrics in Alaska, Rural Medicine in the Adirondacks, and Engeye Health Clinic in Africa.

**FAMILY MEDICINE CALL**

Each second and third-year resident will rotate as the family medicine night float for one and a half months per academic year. The full month is as the medicine night float and the half month is as the OB night float. They will evaluate and admit our family medicine patients with a family medicine faculty attending to either Albany Medical Center Hospital or St. Peter's Hospital. The night float works from 5:00 p.m. to 7:00 a.m. on Monday, Tuesday, Wednesday and Thursday evenings and from 7:00 a.m. Sunday to 8:00 a.m. Monday. Weekend coverage is divided among the remaining residents. Family Medicine call can be from home except on Tuesdays and Thursdays when it is based out of St. Peters Hospital in order to cover Medicine and Pediatrics.

**OFFICE HOURS**

The first-year resident is in the Family Medicine Center seeing approximately four patients per session for one to two sessions per week except as previously described for the Family Medicine Ambulatory month rotation. Second-year residents see approximately six patients per session for three sessions per week. Third-year residents see approximately eight patients per session for four sessions per week. Morning sessions are from 8:30 a.m. to noon and afternoon sessions are from 1:30 p.m. to 5:00 p.m., and evening sessions on Tuesday and Thursday are from 5:00 p.m. to 8:00 p.m. Second and third-year residents are also assigned to continuity pre-natal patients at Koinonia Health Care to follow with our Family Medicine Faculty.

**CORE CURRICULUM CONFERENCES**

There is a core curriculum of conferences held on Thursdays from noon to 3:00 p.m. Individual faculty members and residents are responsible for the conference topics in their area of special interest or expertise. The conferences are presented by local physicians or the Family Medicine faculty. Lunch is provided.

**RESIDENTS' MEETING**

There is a monthly meeting run by the chief residents to discuss issues and concerns of the residents. The Program Director and Associate Director are invited to the final portion of the meeting so that changes and issues in the residency can be addressed.

**MORNING REPORT**

Faculty and residents meet on Tuesdays and Fridays to discuss the diagnostic and therapeutic issues concerning the inpatients on the Family Medicine service or other interesting cases.
JOURNAL CLUB
The residents conduct a Medicine/OB monthly Journal Club to review recent advances in the medical literature. OB/GYN or internal medicine topics are presented.

RESIDENT SUPPORT GROUP
First-year residents and also the second and third-year residents meet monthly with the Behavioral Science faculty to touch base and support one another.

OB AND SPORTS MEDICINE
OB and Sports Medicine tracts are available to our residents, allowing them to choose preferentially certain electives pertaining to their interests.