POST-ACUTE NURSING HOME ROTATION 2015-16
Revised July 2015
Berkley East SNF
2021 Arizona Avenue (x 20th), Santa Monica
(310) 829-5377 (enter 3 for 3rd floor, 4 for 4th floor)

ATTENDINGS:
Dr. Michelle Eslami (admits Fri, Sat, Sun, Tues; rounds Mon, Thurs)
Dr. Susan Leonard (admits Mon, Wed, Thurs; rounds Mon or Weds, Fri)

PRIMARY SUPPORT STAFF:
Joselyn (LVN, UCLA Nurse Liaison) – Admissions, Discharges, Lab results, anything that you need help with
Adelita Cabagnot (NP) – she covers the attending’s non-teaching panel when they are away

OTHER KEY STAFF:
Director of Nursing: Irene Hahn, RN
Physical therapists, Occupational therapists, Speech therapists (Rehab Director: Kevin Howells, PT)
Social worker (office on 4th floor)
Psychologist: Dr Eden Zigman (Mondays)
Dentistry: UCLA housestaff & attending (Thursdays)
Podiatry: once a month (a sign-up list is on the wall)
RN is present at all times; most are LVNs and CNAs
Hospice nurse if someone is on SNF hospice
Note: There are no respiratory therapists available

MEDICAL STUDENTS & RESIDENTS:
-Residents may admit patients, but are only occasionally present during this rotation
-Medical students currently do not admit or follow patients; they join rounds on Thursday and/or Friday mornings

KEY LECTURES:
-Overview to Nursing Home Care
-Orientation to Physical Therapy and Occupational Therapy (and how to read their charting)
-Pressure Ulcers, Other Ulcers, and Wound Care
-Hip Fracture Treatment and Complications
-Care Transitions and levels of care
-Anticoagulation in orthopedic procedures
-DME and home health

HOURS & LOGISTICS:
-Patients (residents) are on the 3rd and 4th floors; PT/OT is located on 1st floor.
-Mon-Fri, 8 am to 5 pm (or until work is done)
-Pre-rounding is expected to start at 8AM Mon-Fridays except on your clinic days or state home days. After your clinic sessions and half-day state home visits, please report back to the nursing home. If you are running late or if you need to leave the nursing home premises during office hours, please inform Joselyn Bumacod, our nurse liaison. Please leave your contact information with Joselyn.
-Let attendings know at start of rotation which clinic day you have (eg Tues or Wed) and any anticipated approved time away.

BEFORE YOU START:
-Written & verbal signout from Fellow going off-service; there is a template for this.
-Expect to have ~6-9 patients per attending, or ~12-18 patients total
-On first day, please arrive at 8 am for orientation and so SNF staff can meet you – find Joselyn or an attending
-You are responsible for all patient issues between 8 am to 5 pm, so be available by phone/pager.
PARKING:
- Valet parking in underground garage 8 am – 8 pm
- Tell them you are the new Fellow (free parking for physicians)
- After 8 pm, your car key is left in a gray metal box at the 3rd floor nursing station

PHYSICIAN WORKROOM:
- Located on 3rd floor (across from room 309)
- Only Joselyn and UCLA staff have key access to the room; will have a keypad eventually. Pick up the key from Jocelyn.
- Laptop passwords: drtoads (encryption screen); geriatrics#1! (geriatric fellows icon in windows login-subject to change)
- Connect to wireless internet by clicking green “connect” button in black box on right side of screen
- Access Care Connect to review patient charts (for those admitted from UCLA – the majority)
- Laser printer
- Forms: H&P, Progress Notes, MOCA, physician order sheets, etc

FELLOW’S RESPONSIBILITIES:
1. Admit assigned new patients to the nursing home. This involves doing a complete history and physical examination including
   a) Chief complaint
   b) Review of systems
   c) Baseline functional status prior to hospitalization
   d) Folstein Mini-mental examination or MOCA
   e) The assessment must have medical diagnosis (not system based) and plan for each problem.

2. Please call family or the responsible party listed in the chart on admission to introduce yourself, obtain collateral information, and to review the plan of care. This is ESSENTIAL.

3. You must review all admission orders even if you aren’t physically present when they arrive upon your next visit. All blood pressure medications require hold parameters (e.g. SBP< 110/heart rate < 55/minute for b-blockers. All antibiotics need an indication (e.g. pneumonia, UTI, etc) and stop date. You can discontinue any unnecessary or prn’s that might not be needed and add medication you feel the patient may benefit from (e.g. bowel medications/osteoporosis medications)

4. All lab orders and other medications ordered must include indication. In general, all INR results must have an order for warfarin dose as indicated (e.g. continue the same dose, change the dose to…)

5. Please sign out any problems each evening with the MD on call and each weekend if necessary. The monthly Geriatrics-on-Call schedule is posted on the Mednet.

6. At the end of the rotation, please provide a sign-out of your existing patients to the incoming fellow (please check with your attending physicians which patients are to be handed off to the next fellow).

7. Please check your mednet email and care connect messages routinely in the morning before you start your pre-round, and regularly throughout the day; these are important methods of communication among geriatric division providers. Overnight and weekend issues/calls from the SNFs, are communicated in the morning by the geriatrician-on-call (GOC) through the mednet email system.

ROUNDS:
- Meet at physician’s workroom on 3rd floor (marked “Exam Room”, across from room 309)
- Check with attendings at start of each week regarding rounding times (sometimes attending on other services)
ADMISSIONS:
- Ask Joselyn first thing in the morning about anticipated admissions, or admits over the weekend
- Multiple physicians (not just UCLA) have patients being admitted to Berkley East; so if a staff member tells you about a new admission, make sure it is for either Dr Eslami or Dr Leonard
- You should get a sign-out from the inpatient team – if not, call them directly before they leave the hospital
- Verify orders (review med list and orders, and sign off on the sheets);
- All ortho patients should have: (1) follow-up appt with Ortho, (2) DVT ppx, (3) pain meds (mild/mod/severe)/laxative if on opioids, (4) PT/OT - MAKE SURE PT HAS DVT PPX (sometimes missing); total of 2-4 weeks post-op from Ortho procedures
- Technically you have 24 hours from patient arrival to write the H&P; however, do not date your H&P until the attending rounds with you and signs off on your plan. Please check with attending about when to “close the encounter” on your notes to allow for addendum and co-signature.
- Lots of little red tabs that say “sign here” in the patient chart – SIGN THEM (usually telephone orders or PT)
- After things are settled, call the patient's family or meet them at bedside to introduce yourself and provide updates. Make sure you have correct contact information.
- Make sure POLST form is personally reviewed with patient and/or family member and signed (even if SNF staff have already prepopulated the form – patients sometimes change their mind after physician's explanation)
- ALL opiate orders need a controlled substance script -- get one from the attending if you don't have your own scripts
- Admission and progress notes should be typed out in care connect unless otherwise specified – We will review how notes are done in care connect.

PROGRESS NOTES:
- Each patient should have 2 notes per week on average (any change in condition or updates with acute issues may warrant additional notes)
- Generally, the notes should be done by the day you round with each attending. Once the plan of care is discussed, the encounter should be closed and sent to the attending for co-signature. Please check with each attending regarding her preference for notes.

DISCHARGES:
- Review d/c orders with Jocelyn the day before anticipated discharge
- Discharge orders should have: Home PT/OT/RN/MSW (if applicable), DME (if applicable), “DC home with responsible party at [time]”, “DC home with remaining medications,” and F/U with PCP/Ortho in [time frame]
- Usually best to order DME a few days ahead so it is waiting for patient at home
- Reconcile medications, and provide new opiate/controlled Rx scripts if needed
- Type or dictate all discharge summaries and cc: PCP (get address if outside PCP)
- Also email or call PCP to notify them of d/c & any f/u issues or labs
- For all discharged patients who were being followed by the antiocoagulation clinic (ACC) before their admission to the SNF or for patients who are to be newly enrolled by the antoagulation : please email the ACC and provide the relevant information (email: DOM WW-Anticoagulation)

TRANSFERS:
- discuss with your attending
- please call the ER and the admitting Geriatrics resident and provide handoff (phone numbers below)
**DICTATION INSTRUCTIONS FOR D/C SUMMARIES:**

***most type out notes in care connect instead***

(310) 794-2001

Physician ID# (your pager #)

Location code: 3#

Work Type: 99#

Pt's CSN number (see note below)

Dictating MD (your name & pager #)

Patient's name & MRN

Date of Service

Date of Admission/Discharge

CC: your attending for cosignature, and the PCP

Admitting Diagnoses

Discharge Diagnoses

Brief HPI/Reason for Admission

-Mention that they were transferred from [name of hospital] to Berkley East SNF

Course of Rehab

-How much were they ambulation, how much assistance for ADLs and transfers, etc

-Also discuss other medical problems that were managed

Discharge Vitals & relevant exam (include date of exam if discharge date is not the same as exam date)

Discharge Meds

Labs

DME ordered

Home Health ordered

Discharge location (to and with)

Follow-up Plan (PCP, surgeon, etc)

Additional DC instructions

Enter 5# to end the dictation, and write down the work # for reference

**Note about CSN:** It’s an 11-digit number located in the patient header below the MRN (Medical Record Number) on Care Connect. If no CSN is assigned, create one by doing either of the following:

a) Click on encounter, select Patient Care from the drop down menu, then enter patient’s name or MRN under Patient Lookup. A new window will pop-up, click on New Encounter. Click New, select CC Lite Notes under Type. OR

b) Add four zeros before the 7-digit UCLA medical record number.

**Important phone numbers/pagers**

a) Berkley East—310-829-5377 (main number)

b) Pagers: Dr Eslami #15448, Dr Leonard # 27330

c) Geriatric resident at Santa Monica hospital-pager 91907

d) Santa Monica Hospital operator-310-319-4500

e) Admissions/Bed control for transfers from the Nursing home to Santa Monica hospital- 310-319-4780 and ask for Odessa.

f) UCLA, Westwood Hospital, page operator-310-825-6301

g) UCLA, Westwood ER-310-267-8407—speak with triage nurse or MD

h) Santa Monica Hospital ER-310-319-4870-speak directly with MD