UNIVERSITY OF HAWAII INTERNAL MEDICINE RESIDENCY PROGRAM

NEWSLETTER

JULY - AUGUST 2009

FELLOWSHIP MATCH RESULTS

Congratulations to the residents participating in NRMP Fellowship matches for positions starting in 2010:

Chief Medical Resident Dr. Ryon Nakasone matched at Scripps Green in San Diego, California in Hematology/Oncology .

Dr. Nuntra Suwantarat matched at Case Western Reserve University in Cleveland, Ohio in Infectious Diseases.

2009 graduate Dr. Jonathan Dworkin matched at Brown University in Providence, Rhode Island in Infectious Diseases.

RESIDENCY IN THE TIME OF SWINE INFLUENZA

Nearly three months after the first cases of swine influenza due to a novel H1N1 virus were reported in Mexico, on June 11, 2009 the World Health Organization declared a worldwide pandemic due to this virus. As of July 24, 2009, 43, 771 cases and 302 deaths were reported to the Centers for Disease Control (CDC) from the United States and its territories. On the same day due to the large number of cases occurring, CDC ceased providing data on individual confirmed and probable cases of novel H1N1 influenza. The CDC will, however, report the total number of hospitalizations and deaths each week, and continue to use its traditional surveillance systems to track the progress of the novel H1N1 flu outbreak.

Hawaii has been hit hard with cases of H1N1 and remains one of seven states with widespread activity. By July 24, 2009, 1404 cases and 3 deaths had been reported to CDC by the Hawaii Department of Health. In Hawaii, H1N1 is now the most prevalent influenza strain being diagnosed. UHIMRP residents have been among the exposed and the infected.

The week before the start of the 2009-10 academic year, one of our incoming interns who had been exposed to a current resident with confirmed influenza A came down with an influenza-like illness which was later confirmed as novel H1N1 during the second day of UHIMRP orientation. At that point all the Internal Medicine and Transitional incoming interns and the Program Director had significant exposure on the first two days of orientation during which the sick intern was potentially infectious even before becoming symptomatic.

All were offered prophylaxis by UHIMRP but it was a major challenge to get thirty-four people started on a timely basis within the 48hr deadline, during which Tamiflu is likely to be of preventive benefit, on a Saturday. Many incoming residents did not have insurance coverage before their July 1 start date. A quick call to Richard Philpott reassured us that he supported our effort to protect our intern work force as Hawaii Residency Programs agreed to underwrite the cost of a prophylactic regimen of oseltamivir. Program Administrator Kari Noble gave up her Saturday to call the major pharmacies in Honolulu to inquire about the out of pocket cost of oseltamivir to the uninsured residents. There was a substantial variation in price from $83 to $127.

The larger big box store-affiliated pharmacies were consistently cheaper and residents who had Sam's Club and Costco memberships were so directed. Within a few hours some of the pharmacies in town to which large numbers of prescriptions were being called began to run out of oseltamivir. Luckily, The Queen's Medical Center pharmacy had received a new shipment and they were able to fill the remaining afternoon prescriptions. Dr. Janet Onopa assisted with the mass prescribing for the incoming interns. Dr. Bruce Soll also helped with calling in prescriptions to the Block 13 inpatient teams at QMC who were also among the exposed.

UHIMRP HAS NOW INSTITUTED A POLICY THAT ALL RESIDENTS AT ALL SITES PROVIDING DIRECT PATIENT CARE HAVE DAILY TEMPERATURE CHECK AND SYMPTOM INQUIRY AT THE START OF THE WORK DAY UNTIL FURTHER NOTICE. ANY RESIDENT WITH A TEMPERATURE OF >100, COUGH AND/OR SORE THROAT SHOULD NOT WORK. THEY SHOULD BE EVALUATED BY THEIR PCP FOR INFLUENZA AND SCREENED WITH AN INFLUENZA A RT PCR. RESIDENTS WITH AN INFLUENZA-LIKE ILLNESS ARE NOT ALLOWED TO RETURN TO WORK WITHOUT A NEGATIVE PCR RESULT OR THEY MUST STAY OFF WORK FOR 7 DAYS AFTER ONSET OF SYMPTOMS OR >24hrs AFTER RESOLUTION OF FEVER, WHICHEVER IS LONGER. THESE OFF WORK TIME PERIODS ARE NOT ALTERED BY THE USE OF ANTIVIRALS.

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KNOW THE ACGME COMPETENCIES

PATIENT CARE

MEDICAL KNOWLEDGE

Residents must demonstrate knowledge of established and evolving biomedical, clinical and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this medical knowledge to patient care.

Residents are expected to learn the scientific method of problem solving, evidence-based decision-making, a commitment to lifelong learning and an attitude of caring that are derived from humanistic and professional values.

Residents must demonstrate an investigatory and analytic thinking approach to clinical situations.

Residents must know and apply the basic and clinically supportive sciences which are applicable to Internal Medicine, its subspecialties and other disciplines.

PRACTICE-BASED LEARNING & IMPROVEMENT

INTERPERSONAL & COMMUNICATION SKILLS

PROFESSIONALISM

SYSTEM-BASED PRACTICE

"NO MAN IS A GOOD DOCTOR WHO HAS NEVER BEEN SICK HIMSELF"
CHINESE PROVERB

SWINE FLU (CONTINUED)

JABSOM medical students were also among the exposed. We have worked closely with Dr. Laurie Tam and Dr. Cynthia Hew to ensure that medical students doing internal medicine clerkships are also evaluated by the same screens and receive timely care in the event of an exposure during their rotation.

We have also had resident exposures from patients being taken off isolation inappropriately. Patients with an influenza-like illness should not be taken off isolation on the basis of a negative rapid antigen test; they should only be taken off isolation if their influenza PCR is negative. If they have confirmed influenza, they must stay in isolation at least 7 days after onset of symptoms.

This Pandemic has been a valuable education in all of the competencies. Residents have been challenged to keep up with the MEDICAL KNOWLEDGE in Infectious Diseases about novel H1N1 which is growing and changing almost daily. They have learned PATIENT CARE skills such as inquiring about influenza-like symptoms in patients being admitted with asthma exacerbations or community-acquired bacterial pneumonia which may be secondary to primary influenza. Residents have had lessons in PRACTICE-BASED LEARNING AND IMPROVEMENT when they have seen and experienced first hand the results of inadequate isolation of patients with influenza. The barriers to efficient diagnosis and triage of patients with influenza-like illness as well as the difficulties in obtaining prophylactic oseltamivir for uninsured residents on a Saturday morning have been lessons in SYSTEMS-BASED PRACTICE. Hats off to our two Chief Medical Residents Dr. Kahea Rivera and Dr. Ryon Nakasone whose excellent INTERPERSONAL AND COMMUNICATION SKILLS have served as important information links to our residents at risk. Due to a large number of resident absences from influenza-like illness, we have utilized an unprecedented number of jeopardy calls from residents on electives pulled in to cover night call. We are very proud of our residents' PROFESSIONALISM demonstrating empathy and compassion in their willing coverage for their ill colleagues. The other lesson in PROFESSIONALISM seems to be more difficult: staying home and off work when sick to avoid infecting other patients and colleagues.

Stay tuned. There are more lessons to come from Pandemic influenza ....

2009-2010 PROGRAM COMMITTEE CHAIRS:

CURRICULUM COMMITTEE:

Co-Chairs: Dr. Cynthia Hew & Dr. Gautam Deshpande

FIRM DIRECTOR COMMITTEE:

Chair: Dr. Janet Onopa

SELECTION COMMITTEE:

Chair: Dr. Bruce Soll

RESIDENT EVALUATION REVIEW COMMITTEE (RERC):

Chair: Dr. Reid Ikeda

PROGRAM DIRECTORS COMMITTEE (PD):

Chair: Dr. Erlaine Bello

INSTITUTIONAL REVIEW COMMITTEE (IRC):

Chair: Dr. Erlaine Bello

PROFESSIONALISM SCORECARD

In July 2007, we implemented a Professionalism Scorecard. This scorecard captures all of the major Program requirements as well as some other important aspects of Professionalism during the course of residency training, such as turning in faculty evaluations on a timely basis. This tool also offers training and evaluation in the three General Competencies of Professionalism, Practice-Based Learning and Improvement and Systems-Based Practice.

All requirements have been given a numerical value and a minimum and maximum benchmark score. The requirements are level specific. The scorecards are reviewed with residents by their Firm Directors during their semi-annual meetings. Residents who do not meet benchmarks are given feedback. Understanding program requirements and how to fulfill them is a lesson in Systems-based Practice. Timeliness in meeting benchmarks is a measure of program citizenship and Professionalism. Residents' response to the Firm Directors' feedback on how they are meeting benchmarks is a demonstration of Practice-Based Learning and Improvement skills. The list below is of residents who were above the level specific benchmark in 2008-2009:

2008-2009 Level 1 Residents:

Suttirak Chaiwongkarjohn
Kristine Cornejo
Takeshi Iimura
Nachinsuren "Nyama" Jacobi
Arksarapuk "Puck" Jittirat
Fumihiro Kodama
Sandy Liang
Song Ching Ong
Suzanne Sachsman
Yotsawee Sanguanjin
Somasundaram "Soma" Subramaniam
Takayuki Suzuki
Nicholas Trakul

2008-2009 Level 2 Residents:

Lana Arakaki
Joey Kohatsu
Licheng "Tony" Lee
Dagmar Lin
Nuntra Suwantarat
Sabrina Tan

2008-2009 Level 3 Residents:

Teera Chentanez
Nalurporn Chokrungvaranon
Joanna Griffin-Boyce
Takashi Hato
Amy Hong
Sudumpai Jarukitsopa
Meiko Kuriya
Rachel Lee
Ryon Nakasone
Mark Nishihara
Yasuhiro Norisue
Pornpoj Pramyothin
Dorothy Shigaki
Erik Von Hagen

BITS & PIECES

Welcome Party Postponed—We'd like to thank Dr. Elizabeth Tam for opening up her home for the Welcome Party in June. Due to active transmission of Swine Flu the Welcome party was officially cancelled, but several faculty, few residents, and medical students came anyway.

The Twilight Burger—Dr. Bello's culinary skills at the Burgers on the Edge landed her in the finals of the Burger Genius contest with her Twilight (Vampire) Burger. The burger was loaded with everything red: red bell peppers, ketchup, red leaf lettuce, and sharp provolone. Dr. Lana Arakaki was a good sport volunteer patient on the Burger Genius Reality TV show that followed Dr. Bello to Monday morning ID clinics in QEC. Congratulations Dr. Bello, it must have been a killer burger!

It's a Boy for UHIMRP 2002 graduate Dr. Peem Lorvidhaya!—His baby boy, Jai ("heart" in Thai) Richard Lorvidhaya, was born 7/10/09 (37 weeks) at 7 lb 1 oz. Mom and baby are doing very well. Although, Peem reports "Dad is still recovering."

Delivery for Dr. Ivy Nip!—Dr. Nip delivered her baby boy, Jason, on 5/29/09 at 6:58am. Mom reports that he is "happy, healthy and doing what most babies do—eat sleep, poop and play—though not necessarily in that order!" Big sister Jordyn has been "serving as first mommy assist—even willing to help with diaper changing!" Dr. Nip, her husband Douglas, and big sister Jordyn were ecstatic to finally meet him!

It's a girl for Matthew & Dr. Amanda Haley!—Evangeline Rose Haley was born on 6/23/09 at 6:22am weighing 5 lb 16 oz. Both Mommy and baby are doing well.

2008 UH Med/Ped's graduate—Dr. Leila Okinaka accepted a position at The Queen's Medical Center Comprehensive Weight Management Clinic.

SCHEDULE OF EVENTS

- **Tuesdays** —Academic 1/2 Day starts again July 7, 2009!
- **July 28, 2009**—S.A.F.E.R. Modules Due!
- **August 11, 12, 14, 17, 18, 20, 24, or 27, 2009**—ABIM Certification Examination
- **August 28, 2009**—J.A.B.S.O.M. Recruitment Dinner

Coming up:

- **September 11, 2009**—Intern Retreat at Bellows AFB

The Long Coats

As medical students we wore *short* white coats which inducted us into Medicine,
and made us feel like members of the team
Our pockets were stuffed with books and guides and notes
and we scurried frantically to keep up with our Residents
Medical school was our minor league, where we practiced and dreamed of the day
When we would get called up to the Big Show

Today we received our *long* white coats
Now we are in the Big Leagues
We are Interns, rookie Doctors
We would now practice all the skills we learned as students
And wear the uniform of the Big League Docs
With our names written over our hearts
and the insignia of our new team proudly displayed

With our long white coats we now must *Practice* the skills we have practiced
Only this is not a game; lives and livelihoods are in our care
We don't know much yet, but we will work and we will learn
For we are still *students*, only now we can also teach
Those with short white coats who follow us and also desire to be Big League players

We are now Interns
We are now M.D.s
We are now…Doctors

By Justin Yamanuha, M.D.
Transitional Resident, 2009-2010

END-OF-THE-YEAR BANQUET AWARD WINNERS

Congratulations to the winners at the UHIMRP & UHTRP End-of-the-Year Banquet in May 2009! The winners are as follows:

Dr. Jeffrey Nakamura Medical Education Award for Outstanding Intern at Kuakini Medical Center—**Dr. Christian Geannette (Transitional resident)**

Dr. Jeffrey Nakamura Medical Education Award for Outstanding Resident at Kuakini Medical Center—**Dr. Jonathan Dworkin**

Queen's Medical Center Outstanding Intern Award—**Dr. Song Ching Ong**

Queen's Medical Center Outstanding Upper Level Resident Award—**Dr. Jonathan Dworkin**

QMC Voluntary Teaching Attending Award—**Dr. Jared Acoba**

QMC Paid Faculty of the year Award—**Drs. Roland Ng & Michael Watters**

QMC Hospitalist of the Year—**Dr. Michael Pfeffer**

Queen Emma Clinics Level 1 Ambulatory Excellence Award—**Dr. Jennifer Kaya**

Queen Emma Clinics Level 2 Ambulatory Excellence Award—**Dr. Emily Diep**

Queen Emma Clinics Level 3 Ambulatory Excellence Award—**Dr. Teera Chentanez**

Award for Excellence in Nephrology—**Dr. Takashi Hato**

Irwin J. Schatz Platinum Stethoscope Award for Excellence in Cardiology—**Dr. Licheng "Tony" Lee**

James A. Orbison, MD Award for the Intern of the Year—**Dr. Nicholas Trakul**

James A. Orbison, MD Award for the Resident of the Year—**Dr. Jonathan Dworkin**

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MEET THE 2009-2010 QMC CHIEF MEDICAL RESIDENT: KAHEALANI RIVERA, MD

Tell us about where you grew up and about any early life experiences that might have predicted a career in medicine.

Born and raised in Hawai`i, mostly in Waipahu, O`ahu. I went to The Kamehameha Schools and participated in a pilot program to encourage students to do medical research. Went to college thinking that I would pursue a PhD so I could continue that pathway. I always cringed when I had to "sac" my mice (sacrifice)....so then decided to pursue an MD where I could talk and interact with people that would hopefully NOT have the same fate at my hands. I also had some personal and family experiences which further swayed me to pursue a medicine career.

Who are your heroes outside of medicine?

My mother. She had Multicentric Castleman's Disease. Never heard of it? I knew what it was as an undergrad. I also knew what it was like to live through diagnostic and prognostic uncertainty. But I also learned through her what it means to smile in the face of adversity and the value of the quality of life, in addition to many other things.

What was the highlight of your last year of residency?

Swine flu. I finished my last month of residency at home quarantined, febrile, dehydrated and anorexic!!!! Given that last symptom, you could tell I was VERY ill…

Why are you an Internist?

I feel that my personality and skills best fit with internal medicine. I aspire to be a healer, one who helps to care for a person's physical, emotional, and social well-being….. I think it may take a while before I achieve this hahaha

What did you learn at the APDIM Chief Residents Workshop?

I learned that there are many more rules that I need to start enforcing. Just kidding guys!!! I want to start a few things which may be a little complicated to explain here. I also learned that you can work as much or as little as you want as a chief.

What do you think about the Duty Hours?

I think ACGME is the new "F" word. Jus' joke! Duty hours are important for resident health, morale, and most importantly, patient care. It leads to complicated census, cap, and call rules…all of which I must monitor….

Describe three goals for your CMR year.

For residents to be good teachers and inspirations for med students and fellow residents. To improve faculty–resident and resident–medical student relations, particularly mentorship. To beat Ryon and Dr. Sumida in a golf tournament with Dr. Soll as my partner, and hopefully *fingers crossed*, he will also be the score-keeper.

What do you see as the biggest challenges for your respective institutions with regard to graduate medical education?

Patient load. Sleep deprivation and "abulia" precluding residents from looking up things independently and teaching each other.

What are the most important things you can teach your medical students?

The most important things to learn cannot be taught in school. See #2.

Why did you seek the CMR position?

So I can torture Ryon all year. Mwahahaaaa! I'm a procrastinator. I wanted to spend a year honing in on my teaching and leadership skills…oh yeah, and to have a decent schedule at some point in my life before I have to find a real job as an attending.

What will you be doing in July 2010?

Hopefully I will not be laid up with a novel H1N1 or H3N2 viral illness.

What is your leadership style?

I don't know but I took a personality test. Does that count? Apparently I am….Laid back, humorous, yet academic and tough (but fair) grrr! when I need to be. I bought a holster for a whip that I can attach to my belt. Interns beware. hehehe

ALOHA CRITICAL CARE ASSOCIATES WELCOMES NEW INTENSIVISTS BY DR. EMILIO GANITANO

Aloha Critical Care Associates, LLP is pleased to announce the addition of four new associates starting this fall. These four new Intensivists will be working closely with the UH Internal Medicine and Transitional Residents at Kuakini , Queens Tower 6, and the new Critical Care Rotation at Straub Hospital.

All four Intensivists are graduates of the University of Pittsburgh Critical Care Medicine Program. Although they will all be new to the residents, the faculty will recognize some familiar faces.

Drs. Graham Cormack, Hiro Sung, and Erick Itoman are recent graduates of the UHIMRP and were part of the so called "UPMC–Hawaii Critical Care Pipeline." All are happy to be back home and look forward staring their careers as Intensivists in our community.

New to the islands is Jonathan Paladino. Dr. Paladino is an Emergency Medicine Physician who completed residency training at the University of Louisiana Baton Rouge before finishing his Critical Care Medicine training at Pittsburgh.

I hope we all take time to welcome our newest faculty members to the UHIMRP Ohana.

Graham Cormack, MD

Hiro Sung, MD

Jonathan Paladino, MD

Erick Itoman, MD

MEET THE 2009-2010 KMC CHIEF MEDICAL RESIDENT: RYON NAKASONE, MD

Tell us about where you grew up and about any early life experiences that might have predicted a career in medicine.

I grew up in Kailua which has to be one of the greatest places on this planet! Ever since learning about cancer in the 8th grade I knew what I wanted to become. All I had to do was figure out how to get there.

Who are your heroes outside of medicine?

My Family. I have a HUGE family and they all have different experiences, backgrounds, but they are some of the most fun-loving, supportive people that you will ever meet.

What was the highlight of your last year of residency?

Finishing. By itself, that is a feat. To be able to look back on the first day of Medical School and see how far I have come is SURREAL. That being said, there is still a lot more roads ahead for me to travel before I am done. I think another highlight would be making new friends from all over the world and sharing our Residency experiences together! It really united us!

Why are you an Internist?

I love talking with and helping people and I knew I especially wanted to focus on those who were afflicted with cancer. I mapped out my course a long time ago, and finally it is all coming to fruition.

What did you learn at the APDIM Chief Residents Workshop?

The first thing I learned is that Kahea is HARD-CORE and that she is going to start enforcing all sorts of crazy rules!!!! Kidding. I learned a lot—but one of the things that I learned is that Residency, as a whole, is all about teamwork from the top down. From the PDs to the DMEs, the Staff, the Attendings, the Nurses, the Housestaff—everyone needs to work together to make this machine work well. Something like miscommunication can just throw a large wrench into it and stop everything dead in its tracks.

What do you think about the Duty Hours?

No comment. Nah, I think that duty hours (if they can be "adhered" to) are a GREAT thing. I do not feel that it impedes one's education at all—in fact I think it enhances it. Residents are happier as a whole, "healthier" (there are exceptions-namely me), and because of that morale is up and I truly feel learning is enhanced.

Describe three goals for your CMR year.

Increase resident involvement in education of the medical students and each other. To see Kahea golf and not kill herself or someone else out there. And, increase mentorship such that applying to Fellowships or going into Private Practice, etc., isn't some scary amorphous thing and that we have good people who are there to help Residents forge their path into the future.

What do you see as the biggest challenges for your respective institutions with regard to graduate medical education?

Have residents abide by the work hours and yet maximize their learning, their medical students learning, and provide top-notch patient care.

What are the most important things you can teach your medical students?

Internal Medicine is better than any other field! I think that it is important for medical students to see that although Residency is hard work, it is worthwhile, fulfilling, can be fun, interesting, and the learning never ends!

Why did you seek the CMR position?

I thought it was the only way to get away from Kahea but she FOLLOWS me everywhere! Education. I like to teach and I thought it would be a nice time to really hone my teaching skills to become more effective and allow me time to see the other side of Medical Education and Residency Training. To me, to truly become well balanced, you need to see different sides of things so you can appreciate it more and learn from it. Doing this will contribute to who you are and who you want to be.

What will you be doing in July 2010?

I will be a Hematology/Oncology Fellow at Scripps Green in San Diego. I am SUPER excited. Also, I think, I will finally be away from Kahea!!!!

What is your leadership style?

Let's just say I am "good cop". I think I am fair, understanding, and I try to lead by example and try to see the humor in everything. I try to be as helpful as possible, and I definitely try to get things done! It will be a FUN YEAR!

END-OF-THE-YEAR WINNERS CONT...

Excellence in Medical Student Teaching Award—**Dr. Kahealani Rivera**

Excellence in Teaching Awards at Hospital QMC—**Dr. Christian Spies**

Excellence in Teaching Awards at Ambulatory Clinics—**Dr. Dominic Chow**

Excellence in Teaching Awards at Hospital KMC—**Dr. Roland Ng**

Clinical Faculty Award for Excellence in Teaching Awards—**Drs. Christian Spies, Jared Acoba, Michael Pfeffer, David Fergusson, & Gary Kuniyoshi**

Excellence in Research Award—**Drs. Robert Eager, Nalurporn Chokrungvaranon, Naveen Gara, Licheng "Tony" Lee, Jon Dworkin, Pornpoj "Piam" Pramyothin, Yasuhiro Norisue, Teera Chentanez, & Kahealani Rivera**

Transitional Excellence in Resident Teaching Award—**Dr. Chet Hammill**

Transitional Excellence in Teaching Award—**Dr. Reid Ikeda**

Transitional Resident of the Year—**Dr. Jon Narimasu**

Please give us feedback on our newsletter! We welcome your thoughts and comments!

Is there something that you would like to share with residents and faculty in a featured article?

Contact Casey Ballard at medsec4@hawaii.edu or Traci Randolph at medsec3@hawaii.edu

University of Hawaii Internal Medicine Residency Program
1356 Lusitana Street, 7th Floor
Honolulu, HI 96813

Phone: 808-586-2910
Fax: 808-586-7486

VISIT OUR WEBSITE!
https://hawaiiresidency.org/medicine