UNIVERSITY OF HAWAII INTERNAL MEDICINE RESIDENCY PROGRAM

NEWSLETTER

JULY-AUGUST 2008

MATCH RESULTS

Categorical:

Suttirak Chaiwongkarjohn, Chulalongkorn University, Thailand

Marvin Elias, Loma Linda University School of Medicine

Danielle Fitzsimmons-Pattison, University of New Mexico School of Medicine

Takeshi Iimura, Kobe University School of Medicine, Japan

Nachinsuren "Nyama" Jacobi, National Medicine University of Mongolia

Arksarapuk "Puck" Jittirat, Mahidol University, Siriraj Hospital, Thailand

Shigehiko Karino, Kanazawa Daigaku Igakubu, Japan

Jennifer Kaya, JABSOM

Fumihiro Kodama, Kogoshima University , Japan

June Lee, Touro University College of Osteopathic Medicine

Sandy Liang, Mount Sinai School of Medicine of New York University

Kristi Lopez, JABSOM

Song Ching Ong, National University of Singapore

Ahoora Payam, Ross University

Yotsawee Sanguanjin, Mahidol University, Siriraj Hospital, Thailand

Somasundaram "Soma" Subramaniam, National University of Singapore

Takayuki Suzuki, Showa University School of Medicine, Japan

Kahoko Taki, Saga Ikadaigaku, Japan

Preliminary:

Jonathan Halford, Stony Brook University Health Sciences Center School of Medicine (Anesthesia: UC San Francisco)

Niloufar "Nelli" Naima, Keck School of Medicine of the University of Southern California (Emergency Medicine: UC San Francisco)

Samantha Onnagan, University of Hawaii John A. Burns School of Medicine (Anesthesia: Harbor-UCLA Medical Center)

Suzanne Sachsman, Keck School of Medicine of the University of Southern California (Radiation Oncology: U. of Southern CA)

Kristine Saiki, JABSOM

Nicholas Trakul, Wayne State University School of Medicine (Radiation Oncology: Stanford University)

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NEW PRELIMINARY RESIDENT REQUIREMENTS

In October 2007, Dr. Nadine Bruce, a former Director of Medical Education at St. Francis Medical Center, former member of the ACGME Residency Review Committee for Internal Medicine, which decides accreditation cycles and past Chair of the Department of Medicine at Northeastern Ohio Universities College of Medicine, did a mock site visit in anticipation of our ACGME site visit in November 2007.

Our site visit was pushed back to ultimately to October 22, 2008 but Dr. Bruce provided us with valuable observations and recommendations improving our compliance with ACGME requirements. One of her important observations was the relative lack of Program requirements for Preliminary residents as compared to our Level 1 Categoricals. She felt it was important to demonstrate that Preliminary residents are held to the same standards as Categoricals during their first year in training.

The Curriculum Committee has implemented the following changes for Preliminary residents for the 2008-09 academic year : 1. Preliminary residents will need to achieve a passing score on the Clinical Skills Exercise which is an observed history and physical on a new patient, formulation of a problem list and a write-up of the history and physical with assessment and management plan; 2. Preliminary residents will be required to demonstrate the knowledge base of the indications, contraindications and obtaining informed consent and technical expertise on arterial puncture, venipuncture, peripheral venous catheter placement, nasogastric intubation, breast examination. Preliminary residents will NOT need to do the five pelvic exams and PAP smears required of Level 1 residents.

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

MATCH RESULTS, CONT.

We are excited to introduce the incoming 2008-2009 intern class! These new Level 1 residents are the 32nd class of the University of Hawaii Medicine residents. We have a talented and diverse group of new residents. Of the 18 Categorical residents, 2 come from our own UH JABSOM, 4 residents are from mainland universities, 1 from a Caribbean university, 5 from Japan, 3 from Thailand, 2 from Singapore and 1 is our first resident from Mongolia.

Our incoming residents have a wide-range of professional, education and research experience. Suttirak worked as an instructor in medicine at his alma mater, Chulalongkorn University. Takayuki worked as a house officer in an urban hospital in Yokohama, Japan. Jennifer represented JABSOM as a preceptor in Japanese medical schools facilitating the application of problem-based learning in 2005. Last year, Yotsawee received a scholarship to serve as a Visiting Physician at Vanderbilt U. Medical Center in Nashville, TN. Ahoora is working on his Master's Degree in Biology. Nyama worked as a Family Medicine Doctor in Mongolia for a year before moving to Hawaii where she worked as a Medical and Research Assistant in Medical Associates at Queen's Medical Center.

For our 6 Preliminary residents, 2 graduated from UH JABSOM and 4 are from mainland universities. Nicholas has a Ph.D. in Cancer biology from the University of Chicago. In 2004, Suzanne worked with Interhealth South America where she volunteered in the rural Andes Mountains.

> LIFE IS A FATAL COMPLAINT, AND AN EMINENTLY CONTAGIOUS ONE"
> -OLIVER WENDELL HOLMES

END-OF-THE-YEAR BANQUET

Reflecting on the End-of-the-Year Banquet, held on May 16, 2008 at the Hawaii Prince Hotel, all of the outgoing Preliminary, Level 3 Categorical and Level 4 Med/Peds residents will be missed. We wish them the best as they start a new professional journey. Banquet attendees were entertained by the beautiful sounds of the Grand piano played by Dr. SY Tan, as well as the stunning local Halau entertainment during dinner, and Dr. Veeravat Taecharvongphairoj playing traditional Thai music on the khim. Residents on Firm Blue sent a special farewell to their Firm Director Dr. CS Chan, who will be officially retiring in October 2008.

Congratulations to all of the Award winners of the night:

Medical Education Award for Outstanding Intern & Resident at KMC

- Emily Diep
- Ryon Nakasone

QMC Outstanding Resident

- Jaelene Yates

HMCE Mother Marianne Award

- Chelsea Ching– Endow

QEC Ambulatory Excellence Award

- Chong Wee Foo
- Ryon Nakasone
- Thana Khawcharoenporn
- Marc Miyasaki

Excellence in Nephrology

- Anne Wajanaponsan

Irwin J. Schatz Platinum Stethoscope Award for Excellence in Cardiology

- Wipat Phanthawimol

James A. Orbinson, MD Awards for Intern & Resident of the Year

- Emily Diep
- Chelsea Ching-Endow

Excellence in Medical Student Teaching Awards

- Jonathan Dworkin
- Ryon Nakasone
- Kahealani Rivera

Excellence in Research Awards

- Nalurporn Chokrungvaranon
- Sadao Jinno,
- Hidetaka Kitazono,
- Thana Khawcharoenporn,
- Tony Lee

Excellence in Teaching Awards at Hospitals & Clinics

- Kuakini Medical Center: Dr. Roland Ng
- Hawaii Medical Center: Dr. Emilio Ganitano Jr.
- Queen's Medical Center: Dr. Gary Kuniyoshi
- Ambulatory Medicine: Dr. Amanda Haley
- Ambulatory Medicine: Dr. Bruce Soll

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Top to bottom: Vee plays the khim; Blue Firm bids a fond farewell to Dr. Chan; Some of the graduates

BANQUET, CONT.

Excellence in Teaching Awards for Clinical Faculty

- Dr. Gary Kuniyoshi
- Dr. Robert Pangilinan
- Dr. James Joyner
- Dr. Helen Sim
- Dr. Royden Young

Transitional Excellence in Resident Teaching Award

- Dr. David Inouye

Transitional Excellence in Faculty Teaching Award

- Dr. S.Y. Tan

Transitional Resident of the Year

- Christopher Merritt

Residents stop to smile for the camera as they socialize at the banquet. *Top:* Cody Takenaka, Jill Olsen, Ryan Vancura, and Sabrina Tan. *Bottom:* Jon Wagner, Julieanne Iinuma, Nate Ponstein and Chris Merritt.

SCHEDULE OF EVENTS

- **July 1** - Start of the Academic Year
- Tuesdays - Academic 1/2 Days

Preparation for In-Training Exam

- ABIM Exams in August
- **August 30** - Deadline to submit your design for a Program T-Shirt that will be distributed to all 2008-2009 residents. Entries should be submitted to the program office or emailed to medsec3@hawaii.edu. There will be a prize for the winning designer!

THE MINI CEX—REVISED!

BY JANET ONOPA, M.D., ASSISTANT PROGRAM DIRECTOR FOR AMBULATORY CARE, ASSISTANT PROFESSOR, DEPARTMENT OF MEDICINE, JABSOM

Our program has used the Mini-CEX for years-- as both a teaching tool and an evaluation tool. Some rotations, such as QEC Block, require it at all levels. Any Continuity Clinic attending or teaching attending can require it to help assess and evaluate their assigned resident.

Four mini-CEXs per year are required by the program for the R2 and R3 years, and they must include both outpatient and inpatient patient encounters. It is a low-stress and efficient way for teaching attendings to see how residents do during clinical encounters.

I had never been very happy with the Mini-CEX format that we had been using, but lived with it because I thought that it conformed to the RRC's "competency-based" evaluation methods. At the recent Association of Program Directors in Internal Medicine (APDIM) conference, I discovered to my chagrin that we have been using an old format. Other programs are generally using a more user-friendly Mini-CEX form. So, I presented a proposal to change the format to what is currently the standard nation-wide, and it was approved by our Resident Evaluation and Review Committee.

A sample of the new Mini-CEX evaluation form is to the right.

So, out with the old forms, and in with the new! Please let me know if there is anything about it that does not work well for you (jonopa@hawaii.edu). If you would like an electronic copy of the new form, email medsec1@hawaii.edu and the evaluation assistant will send it to you.

The New Mini-CEX Evaluation Form

Resident (print): **Level:**	**Attending evaluator (print):**
Date of patient encounter:	**Setting:**
1. Medical Interviewing Skills *(Patient Care)*	Facilitates patient's telling of story, starts with open ended question and sets agenda; effectively uses questions/directions to obtain accurate & adequate information needed; responds appropriately to affect & non-verbal cues.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
2. Physical Examination Skills *(Patient Care)*	Follows efficient, logical sequence; balances screening & diagnostic steps for problem; informs patient; sensitive to patient's comfort & modesty.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
3. Humanistic Qualities/Professionalism *(Professionalism)*	Shows respect, compassion, empathy, establishes trust; attends to patient's needs for comfort, modesty, confidentiality, information
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
4. Clinical Judgment *(Medical Knowledge)*	Selectively orders/performs appropriate diagnostic studies, considers risks, benefits.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
5. Counseling Skills *(Communication and Interpersonal Skills)*	Explains rationale for test/treatment, obtains patient's consent, educates/counsels regarding management, uses appropriate language & vocabulary.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
6. Organization/Efficiency *(Patient Care; Practice-Based Learning and Improvement)*	Prioritizes; is timely, succinct.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
7. Overall Clinical Competence	Demonstrates judgment, synthesis, caring, effectiveness, efficiency.
Rating: (unsatisfactory) 1 2 3 // (marginal) 4 // (satisfactory) 5 6 // (superior) 7 8 9 Comment:	
Resident signature_____	**Attending signature** _____

BITS & PIECES

Transitional Program 5 year Accreditation
The Transitional Program had its continued accreditation site visit on March 11, 2008. All of the hard work and preparation paid off! Dr. Hew, UHIMRP Deputy Director and Director of UHTRP, received notice that the Transitional program has been reaccredited for the next 5 years! Congratulations!

Congratulations Dr. Jennifer Kaya!
New intern and recent JABSOM graduate Dr. Jennifer Kaya was awarded the **American College of Physicians Award for Excellence in Internal Medicine** for excellent performance during her 3rd and 4th years at JABSOM. We are excited that she will be joining our program!

Dr. Tony Lee Presenting in Germany
Level 2 resident Dr. Lee's abstract titled "Relative Impact of BMI and BSA on Racial Disparities in Cardiac Surgery Outcomes," authored along with Drs. Todd Seto and Robert Hong, was accepted for presentation at the European Society of Cardiology World Congress of Cardiology in Munich, Germany this October. This is an achievement and honor for Tony's hard work on his research while he was a busy Level 1 resident.

Congratulations Dr. Chelsea Ching!
Chelsea, a recent UHIMRP graduate, was elected by the JABSOM Class of 2008 of the *Alpha Omega Alpha* Honor Medical Society as one of its Honorary House Staff members.

Second VP Trip To Kobe, Japan
Dr. Michael Watters, Professor, Department of Medicine, will return to Kobe University in Japan in July for an encore performance as Visiting Professor in Neurology at the invitation of Dr. Eiji Hiroaka. Eiji is one of our accomplished UHIMRP graduates from the Class of 2004 who is now on the faculty in the Department of Medicine at Kobe University.

Soon-to-be Mom to Baby Boy
Dr. Malissa Iida-Takashima, Level 2 resident, and her husband, David, are expecting their first child, a baby boy, in October. Congratulations Malissa & David!

MEET DR. FRITZIE IGNO

Where did you go to medical school? At Far Eastern University in Manila, Philippines.

Where did you do your medical training? I completed my residency training in Internal Medicine from St. Joseph Mercy Hospital in Michigan.

Tell us about the jobs you have held before you came to QEC. Right after residency, I joined a private practice group in an occupational medicine center caring for patients with work-related injuries. My first jobs in Hawaii were as a Hospitalist at St. Francis-West and as a part-time physician at Queen's Health Care Center, Waikiki Clinic. When that clinic moved to Hilton Hawaii Village, I became their full-time physician. I joined QEC in November 2003 and became its Associate Medical director in 2007.

What unique experiences does QEC provide for our residents? You may call QEC a "haven" for challenging patients, which is good if you are a physician-in-training. We have specialty clinics in QEC to support our residents with complicated patients. One thing that makes the experiences unique is the dedicated staff. We have our own pharmacist who also runs our coumadin clinic, 3 social workers, and a full-time RN. If you seek challenge to learn, QEC is the place to be.

We are delighted you will be Dr. Chan's replacement Firm Blue Director when he retires. What do you see as the ideal relationship between Firm Director & resident? Dr. Chan is irreplaceable and he will surely be missed. I will be the Green Firm Director and Dr. Janet Onopa will be the Blue Firm Director. As an incoming Firm Director, I will have a lot of things to learn. The ideal relationship with my residents will be that of open communication. I intend to have an "open door" policy, meaning they don't need an appointment to communicate with me. I may not be the most prompt email responder, but I am always in QEC. They can reach me directly at 547-4610 or stop by the clinic any time.

What do you do for fun when you aren't working? I spend most of my time with my family. We have a 6-year-old daughter and this is the most fun time I have (so far!) with our daughter. We go swimming in the pool almost everyday, read books and play princesses. I also love to read.

How can we entice more residents into primary care? Primary care has changed a lot since the advent of Hospital Medicine. It's more "family friendly," with more flexibility in lifestyle depending on what you desire. I am not sure if our medical students are familiar with these changes when they enter medical school. I think this is where we need to start. We need to talk to them in their first year of medical school. I had that opportunity when I did my first CSP (Clinical Skills Preceptor) with first year students this year. I am looking forward to having that opportunity again.

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

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

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