WARD EXPECTATIONS

For new admissions:

\*HPI questions: FAR COLDER-frequency, associated symptoms, radiation, character, onset, location, duration, exacerbating & relieving factors\*come up with differential  
\*ask more questions based on your differential

\*Come with a plan and a hypothesis for a diagnosis  
\*CALL THE PMD

Daily info:

\*Resident is the team leader.  I want you to ask him/her management decisions before deferring to me.  
\*Call with any question (my beeper: 516-975-1840; my cell: 917-991-8902; if you text, don’t use patient names/be hippa compliant)

\*Introduce yourself each day to the patient and explain your role  
\*show up, be honest, play as a team  
\*Order of rounds:3 D's-Dire, Diagnostics, Discharge

\*Come with a plan and a hypothesis for a diagnosis!! Look up why you are managing patient’s the way you are. Evidence based practice!  
\*look for trends

\*be proactive-don’t just communicate through the chart but talk with consultants  
\*read something each day.  it's for consistency, not quantity  
\*work on time management  
  
For discharges:

\*Just because on Monday we were planning to discharge a patient on Tuesday, his/her clinical status may change. Think about whether he/she still should be discharged or if it needs to be deferred  
\*CALL THE PMD

\*d/c summaries should be completed within 24 hours. These can be prepped early if anticipating the discharge on a busy call day

For weekends:

\*contact the attending covering over the phone and make sure you discuss verbally all the patients before signing out for the day