



Ventura Family Medicine Residency

WELCOME TO THE VCMC
FAMILY MEDICINE
RESIDENCY PROGRAM

Ventura

“Hawaii on the mainland.”

(Chamber of Commerce)



VENTURA CHAMBER *of* COMMERCE

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Ventura County Medical Center through the years



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Ventura County Medical Center



Welcome

Announcements

- [Low Cost "Coast2Coast Rx Card"™ Prescription Card](#)

Ventura County Medical Center (VCMC) is a full-service, acute care hospital, and the hub of the county medical service system. VCMC also has a satellite location in the Santa Clara Valley, [Santa Paula Hospital](#). The system provides access to

- Swine Flu Update
- Safety Concerns
- Family Practice Residency
- Location and Maps

<http://portal.countyofventura.org/portal/page/portal/HCA/VCMC>

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patient care is carefully tailored to the needs of the individual.

VCMC serves all of Ventura County, with special emphasis on providing access to care for the underserved and those facing barriers to access. These individuals, referred to as the "safety net" population, comprise over three quarters of the care provided by VCMC.

Service provided include:

- 24-hour emergency department
- 208 bed, general acute care hospital
- Intensive care unit and definitive observation unit
- Obstetrics and gynecology
- Neonatal intensive care unit and intermediate care unit
- Pediatric specialty care
- Telemetry and oncology unit
- Inpatient Psychiatric Unit
- Medical and surgical specialty care including:
 - Cardiology
 - Respiratory services
 - Orthopedic services
 - Imaging and clinical screening
 - Clinical laboratory testing and analysis
 - Pathology – anatomical laboratory

About Our Staff and Facilities

- Education
- Medical Library
- Medical Staff Services
- Nursing Education
- Volunteer Services
- Top 25 Charge List

VCMC Campus Projects and Construction Update

Be Well Pediatric

Who are our patients?

- We see all patients regardless of ability to pay
- We are passionate about taking care of the underserved
- Demographics
 - Predominantly Hispanic in origin
 - Small numbers of Asian and African-American
 - 60% are Medi-Cal recipients
 - 20% are Medicare recipients
 - 10-15% have commercial insurance
 - 5% are uninsured



American Board
of Family Medicine

What is Family Medicine?



Continuity of Care



Comprehensiveness of
Care



Care in the context of
family



Ventura Family Medicine Residency

- A brief history of Graduate Medical Education at VCMC
 - One year general practice residency established in 1928, grew to include an additional optional year of surgery
- Family Medicine Residency established in 1968, (Family Practice at the time) one of first 15 programs accredited by the



- Affiliated with the  Department of Family Medicine
- Only residency program at VCMC





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Administered by the
 American Academy of Family Physicians
 Foundation

THE FIRST FIFTEEN FAMILY MEDICINE RESIDENCY PROGRAMS

A frequent question directed to the Center is: "Which Family Medicine residency was the first?" The answer should be simple, but it is not. Many of the earliest residencies were in existence before essentials for Family Medicine residencies were developed. However, some of those residencies were not listed as accredited until several years later. What can be documented are the first fifteen residencies approved by the Residency Review Committee in December 1968 under the new "Essentials for Approved Residencies in Family Practice." They are as follows*:

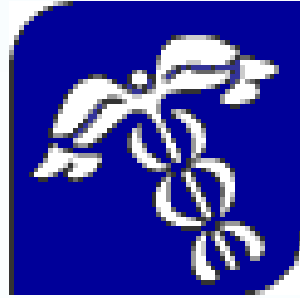
School	Program	Program Director or Person in Charge
University of California-Irvine College of Medicine Irvine, California	Family Medicine	Robert Combs, M.D.
General Hospital Ventura County Ventura, California	Family Practice	J.A. Daly, M.D.
University of Miami School of Medicine Miami, Florida	Department of Family Medicine (Jackson Memorial Hospital)	Cyril E. Carmichael, M.D.
Wesley Medical Center Wichita, Kansas	Family Practice Residency	G. Gayle Stephens, M.D.
University of Maryland School of Medicine Baltimore, Maryland	Division of Family Medicine (University of Maryland Hospital)	William L. Stewart, M.D.
Harvard Medical School Boston, Massachusetts	Family Health Care Program (Peter Bent Brigham Hospital, Children's Hospital Medical Center & Family Health Care Program at Harvard)	Joel J. Alpert, M.D.
University of Minnesota School of Medicine Minneapolis, Minnesota	Division of Family Practice & Community Health	Benjamin Fuller, M.D.
Research Hospital & Medical Center Kansas City, Missouri	Family Practice Residency	Paul R. Young, M.D.
West Jersey Hospital Camden, New Jersey	Family Practice Residency	J.C. Brame, M.D.
State University of New York at Buffalo School of Medicine Buffalo, New York	Family Practice Residency (Deaconess Hospital)	Douglas M. Sargenor, Ph.D.
University of Rochester School of Medicine Rochester, New York	Family Practice Program (Highland Hospital)	Eugene S. Farley, M.D.
Medical College of Ohio Toledo, Ohio	Family Practice Residency (Flower Hospital)	Robert Page, M.D.
University of Oklahoma Oklahoma City, Oklahoma	Division of Family Medicine	Roger I. Lienke, M.D.
York Hospital York, Pennsylvania	Family Practice Residency	Robert Evans, M.D.
University of Wisconsin School of Medicine Madison, Wisconsin	Child Health Service	Marc F. Hansen, M.D.

*As printed in "Graduate Training Programs in Family Practice," December 1968. This printout is now known as Reprint 135-B: ACGME Accredited Residency Programs in Family Practice.



What makes the Ventura program unique?

- Single residency institution
- Training designed to prepare you for practice in underserved settings, whether in America or internationally
- You are the patient's doctor!
- Large number of dedicated faculty in multiple specialties who have come to VCMC to teach
- Superior surgical training, participate in Trauma codes
- Opportunity to learn advanced obstetrical skills
- A growing and robust outpatient Family Medicine Center located in a brand new facility
- A sense of family that is intentionally cultured and promoted



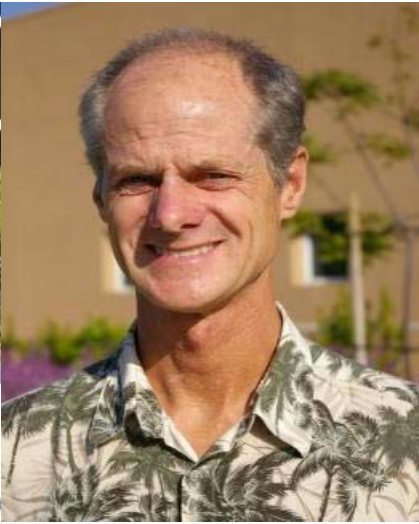
Faculty at VCMC

Physicians who come to VCMC come with the desire and understanding that they will be teaching Family Medicine Residents.

This permeates every aspect of recruiting and maintaining the medical staff of over 200 physicians.

This includes every physician in every specialty.

Core Family Medicine Faculty



Director of Behavioral
Sciences
Ron Bale, PhD



The Curriculum

Curricular Highlights

- 14 rotations total
 - 10 rotations of 4 weeks each
 - 4 rotations of 3 weeks each
- 4 weeks of vacation each academic year
- At least 12-14 weeks of electives over 3 years (maybe more!)
- Academic Family Medicine Center (AFMC) in continuity over 3 years
- ER call throughout all 3 years

Number of Rotations

Rotation	PGY 1	PGY 2	PGY 3	Total in 3 yrs
Medicine-Pediatrics Inpt.	4	4	2	10
Outpatient Specialties	1	2 1/2	3 1/2	7
OB – Gyn	2	2	1	5
Surgery	2	1	1	4
Outpatient Pediatrics	1	1	1	3
Emergency Medicine	ER call	1 (Day)	1 (Night)	2
I. C. U.	1	0	1	2
Ortho-Sports Medicine	1	0	1	2
Night Float - ICU	0	2 wks	2 wks	1
Night Float - OB	0	2 wks	2 wks	1
Selective (NICU, Anes, Beh, elec)	1	0	0	1
Electives	4 wks	4 wks	6-8 wks	12-16 wks
VACATION	4 wks	4 wks	4 wks	12 wks

Academic Family Medicine Center

- The core experience in becoming a family physician
- Increasing responsibility and volume over three years
- See all age ranges and medical problems
- Multiple procedures
- This is where you really develop your own practice style and identity as a family physician!



Inpatient Medicine-Pediatrics

- A rotation that emphasizes the combination of adult and pediatric medicine
- More senior residents are teaching junior residents
- Four medicine teams
- Attendings from both Family Medicine and Internal Medicine
- Busy inpatient service, 6 calls in 4 wks



Team A	Team B	Team C	Team D
1 st Year	1 st Year	1 st Year	1 st Year
2 nd Year	2 nd Year	2 nd Year	2 nd Year
Two Third Year Resident Chiefs			
Medicine Attending	Medicine Attending	Medicine Attending	Medicine Attending
Pediatrics Attending			

- Teams A through D take call in turn (6 calls per month)
- Attending team takes call each Tuesday
- Medicine and Peds work rounds daily
 - Teaching rounds in each Medicine and Pediatrics weekly
- Third years are chiefs of service
- EKG rounds weekly on Tuesdays

Obstetrics/Gynecology

- Both inpatient and outpatient experience
- Labor and delivery experience in a controlled setting, first years work directly with a FM attending on the deck
- Last years grads averaged 137 deliveries over 3 years, 30 C/Sections
- Surgical OB experience, primary C-Section experience
 - Voluntary OB backup call (paid)
 - Tubals, D&Cs, etc
- Senior residents do Night OB float call
 - First years do 1 x wk ER call
- Women's Health Center
 - Pre-natal Care, Gyn consultation, colposcopy experience
- AFMC – Colposcopy, weekly OB ultrasound clinic



Surgery



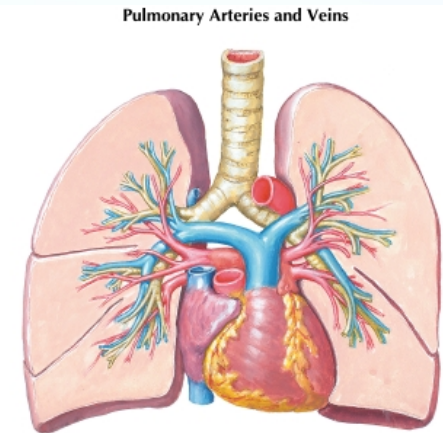
- 4 months over 3 years, 7 calls in 4 wks
- Both inpatient and outpatient
- First responder to all trauma codes
- Dedicated surgical staff that rounds with resident team each morning with trauma specific rounds 3 times/week
- Outpatient surgery clinics in ENT, plastics, urology (OPS), Chest, “lumps/bumps”
- You will be given hands on experience, especially as you show interest and aptitude
- ATLS course (paid for by program)

Emergency Department

- 6 months of ED call for first year residents
- Day ER Rotation – PGY-2
- Night ER (NERD) – PGY-2 and 3
- Residents are expected to take a lead role in managing patients in the ED, especially as a PGY-2, 3
- Run all codes with Attending supervision
- Perform multiple procedures
- Over 800 hours of ED experience in 3 yrs, ACGME requirement is only 200 hours
- Develop a confidence in dealing with “anything”. This is intentional, so that you will be confident in future practice dealing with emergencies.



ICU



- 3 months over 3 year
 - PGY-1 paired with PGY-3 6a-6p, no call
 - Sr Resident-Night ICU coverage 6p-6a
- “Closed” ICU, all patients followed by resident ICU team
- Dedicated Full time Attending staff, rounds each morning at 9, 4 out of 6 Attendings are Family Medicine trained
- Perform multiple procedures: chest tubes, central lines, arterial lines, intubations, etc.
- Respond to all codes, both trauma and medical
- You will be confident in taking care of critically ill patients!

Outpatient Pediatrics



- 3 months over three years, call avg 1 x wk
- Combination of general and specialty pediatrics
- Specialty pediatricians come from both UCLA and Children's Hospital Los Angeles
- Provides a service to our patients so that they don't have to travel to LA
- Peds Diagnostic Center

Outpatient Specialties

- Multiple experiences in outpatient areas, predominantly at VCMC
- 7 rotations over 3 years, call avg 1 x wk
- Work one to one with specialists
- Referral clinics, patients come from all over the county



Medical Subspecialties

Cardiology
Rheumatology
Heme-Oncology
Pulmonology
GI - Hepatitis Clinic
H.I.V.
Renal
Endocrine

Surgical Subspecialties

Urology
Plastics
E. N. T.
Podiatry
Minor Procedures Clinic

Procedures

Vasectomy
Flexible sigmoidoscopy
Treadmills

Student Health
Community Family Practice

Behavioral Science

- Introductory week during Selective as a first year
 - Read the “15 minute Hour” and incorporate principles into your clinic practice
 - Time with psychiatrists, child and adult, and our psychologist
- Observed practice by our psychologist Ron Bale
- “Difficult Patient” discussions during core conference series
- As senior resident on OPS will do inpatient psych consults with psychiatrist, and will see patients on Wed afternoon with psychiatrist
- We believe in an integrative approach to behavioral science

Electives

- 12-16 weeks over three years – No call during this rotation
- Very important experience with which you can tailor your education
- Multiple experiences available locally
- May do up to 6 weeks away from VCMC
 - May do international medicine rotations
 - There is available funds through the FMed fund to support international rotations
 - Rotations at another hospital/clinical setting
 - May use elective time to attend a conference, visit a potential practice site

Vacation

- 4 weeks in each year of residency
- Tied to certain rotations throughout the three years
- Goal is to provide you time away to relax!
- Cannot carry over vacation to the next year (ABFM rule)



Duty Hours

There will be changes this next academic year based on the new ACGME work hour regulations.

We support the spirit and intent of providing reasonable work hours for residents in training.

The program is undergoing a review of our current rotations and will be making changes to meet the new regulations.

This most likely will involve the use of increased night float.

Understanding the call system: who is actually on call on a given night

Med Peds 2	R-2	Medical admits (6 calls in 4 wks) (not Tuesdays)
Med Peds 1	R-1	
ICU/Night Float	R-2/3	ICU admits, Cares for monitored patient
Night OB Float	R-2/3	Labor management and delivery overnight
Surgery	R-123	Surgery admits and OR (7 calls in 4 wks)
ER - 1	R-1	Overnight call in ER (not Sundays) avg 1 x wk
Day ER	R-2/3	Day time coverage
NERD	R-2/3	Night shift resident, runs ER
House Backup (paid)	R-2/3	Called in when overly busy, sick residents
OB Backup (paid)	R-123	Voluntary call from home for C-sections

Didactics/Conferences

- Protected time every Tuesday from 4-6 pm – Required conference
 - Resident Core conference series on a 18 month schedule
 - Provide the academic base for Family Medicine
 - All phone calls, services, rotations, etc. are covered so that residents can attend
- Other conferences
 - Medical Staff Grand Rounds
Wed/Thurs 8 am – Residents expected to attend
 - Tumor/Chest Conference Friday 12 noon



Resident support

- Every resident is assigned a core faculty member as their advisor for three years
 - Your advisor will meet with you regularly to review your evaluations and provide a bi-annual summary evaluation
 - Regular meetings to review your and approve electives
 - Your faculty support person when you have difficulties
- Regular class support meetings on evenings at a faculty member's house, call is covered
- Resident support meetings facilitated by chiefs
- Regular social gatherings by residents, sports teams, potlucks, surfing together, sailing, outdoor activities, hiking, etc.

Benefits (!)



- Competitive salary
 - First Year Residents (PGY-1) \$46,061
 - Second Year Residents (PGY-2) \$51,371
 - Third Year Residents (PGY-3) \$56,732
 - Chief Residents (PGY -3) \$60,069
- Pagers
- Free food, resident families eat free on call days
- Health, Life, Disability Insurance
- Malpractice Insurance
- \$1500/year for books, software, conference support
- Medical License \$900 in PGY-2
- Live in a wonderful California beach community!





Our Philosophy

Residents learn best in a supportive environment

We are a family

Excellence in education translates into excellence in care