

Internal Medicine Residency Program
Electives 2021- 2022

- **ACUTE Center for Eating Disorders and Malnutrition**
 - **Director:** Dr. Allison Nitsch (Allison.Nitsch@dhha.org)
 - **Description:** This elective will introduce residents to the myriad medical complications that develop in the setting of malnutrition. Residents will become adept at understanding the pathophysiologic changes that occur with extreme starvation and purging behaviors, including various conditions that are rarely seen outside of severe malnutrition. Residents can also expect to gain an increased understanding of the neurologic effects of malnutrition as well as a better understanding of the psychiatric treatment of those with severe eating disorders and their comorbid psychiatric diagnoses. Residents will work under various ACUTE attendings and make daily decisions regarding the care of their patients. Clinical rounds will be supplemented with various lectures from ACUTE attendings as well as M/M conferences, the weekly multidisciplinary team meeting, and self-directed learning.
 - **Location:** DH
 - **Ambulatory %:** 0 (no call or weekends)
 - **Reviewed/Revised:** 1/20/2021

- **Allergy, Asthma, and Clinical Immunology**
 - **Director:** Dr. Jenny Stitt (Jenny.Stitt@CUAnschutz.edu)
 - **Description:** This elective will introduce residents to allergic and immunologic diseases including allergic rhinitis, asthma, immunodeficiency diseases, drug allergy, food allergy, anaphylaxis, venom allergy, urticaria, angioedema, and eczema. Residents will learn indications for allergy diagnostic testing and how to perform and interpret allergy skin tests and spirometry. Residents will rotate through clinics at both the University of Colorado and National Jewish Health. This is an outpatient experience and no evening or weekend call is required.
 - **Location:** UCH, NJH
 - **Ambulatory %:** 100
 - **Reviewed/Revised:** 2/25/2019

- **Addiction Medicine Elective**
 - **Director:** Dr. Katie Ochoa (Katherine.Ochoa@dhha.org)
 - **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
 - **Restrictions:** PC Elective – Primary care residents will get priority but all tracks will be considered.
 - **Description:** Outpatient 4 week elective focused on learning the spectrum of care for patients with addiction. Based at Denver Health working with OBHS, Consult Liaison service, primary care buprenorphine prescribing, certified addiction counselors, psychiatry and others. If not already done, protected time will be provided for 8 hour online X-waiver training, such that resident will be licensed to prescribe suboxone along with their DEA license upon graduation. Skills that will be a focus of this rotation include 1) Identify risky substance use, 2) recognizing and treating opioid addiction in patients with chronic pain, 3) Motivational interviewing as a tool for helping patients achieve healthy changes, 4) Harm reduction for all risk taking behaviors, 5) prescribing for opioid addiction, 6) prescribing for alcohol addiction, 7) prescribing for nicotine addiction.

- **Location:** Denver Health hospital, clinics, and community sites
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/2021

- **Cardiology Consult Service**

- **Director:** Dr. Peter Buttrick (Peter.Buttrick@CUAnschutz.edu)
- **Coordinator:** Nikki Dean (Nikki.Dean@CUAnschutz.edu)
- **Description:** Residents rotating through the cardiology service are primarily responsible for inpatient consultative cardiology, generally for surgical and general medical services, with additional exposure to coronary care unit patients. Residents are expected to become proficient in the evaluation of common consultative cardiologic problems, especially preoperative risk assessment, chest pain, and atrial fibrillation. Considerable emphasis is put on the history, physical examination, and the proper interpretation of cardiologic tests. Residents have the opportunity to become more proficient in EKG interpretation and in the performance of stress tests. Residents wishing more specialized exposure to cardiology topics, such as hemodynamic monitoring or echocardiography, may do so by prior arrangement. Night or weekend call is not expected.
- **Location:** DH, VA
- **Ambulatory %:** 10
- **Reviewed/Revised:** 2/6/2020

- **Cardiology Outpatient**

- **Director:** Dr. Peter Buttrick (Peter.Buttrick@CUAnschutz.edu)
- **Coordinator:** Nikki Dean (Nikki.Dean@CUAnschutz.edu)
- **Description:** This rotation focuses on the ambulatory treatment of patients with cardiovascular disease. Residents will rotate through clinics at the University, Lone Tree and Denver Health. General cardiology clinics and sub-specialty clinics include electrophysiology, lipid clinic, and vascular clinic. There is also time to participate and learn about ambulatory cardiology procedures like stress testing, echocardiography (and TEEs), and catheterizations.
- **Location:** UCH, DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 2/6/2020

- **Cardiology for the Primary Care Resident**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to PC residents
- **Description:** In this rotation residents gain experience in ambulatory cardiology specifically tailored to suit residents' needs. Residents will rotate at South Denver Cardiology clinic, a large private general cardiology group with senior partners who are former UCH faculty. Education includes general cardiology learning and time interpreting echocardiograms, nuclear stress tests, and doing treadmill tests. There is potential opportunity to spend portions of this rotation with Denver Health faculty/providers in general cardiology, electrophysiology, and Healthy Hearts clinic as well. This is a great opportunity for those seeking to practice and augment their outpatient cardiology skills.
- **Location:** South Denver Cardiology and Denver Health, as available

- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/21

- **Complementary and Integrated Health (CIH)**

- **Director:** Dr. Francie Palmer (Frances.Palmer@CUAnschutz.edu)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** PC Elective – Primary care residents will get priority but all tracks will be considered.
- **Description:** This elective is designed to help residents develop a broad understanding of complementary and integrative therapies. Residents work with University, Kaiser and community providers who specialize in various complementary and integrative health healing disciplines, including acupuncture, naturopathy, yoga therapy, hypnosis, meditation, and shamanism. Residents must truly be interested in learning more about CIH therapies and are required to submit 1-2 paragraphs to the elective director outlining their interest in CIH (what they hope to gain from the rotation and how they will apply knowledge gained in their future practice). In order to maximize the experience, your predetermined vacation in your cohort may need to be changed as this elective relies on the ability of residents to gather on the same days to meet with certain providers. This rotation is offered to 2 residents per 3-4 week block during the following months: 1 rotation in fall (Sept-Nov), 3 rotations in spring (Jan-June). This rotation is not offered over holidays.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/21

- **Clinical Nutrition**

- **Director:** Dr. Francie Palmer (Frances.Palmer@CUAnschutz.edu)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** PC Elective – Primary care residents will get priority but all tracks will be considered.
- **Description:** Optional during CIH. This one-two week elective focuses on active learning through time with registered dietitians, mid-level nutrition providers, and physicians who run nutrition specialty clinics. Experiences are scheduled based on resident's areas of interest and career goals, as well as clinic and preceptor availability.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/21

- **Clinical Elective in Narrative Medicine**

- **Director:** Dr. Mark Kissler (Mark.Kissler@CUAnschutz.edu)
- **Restrictions:** Only offered once per year.
- **Description:** This new clinical elective provides a foundation in the theory and practice of narrative medicine. Residents will care for a small census of inpatients (2-3) and participate in afternoon intensives that bridge their clinical work with a rigorous study of the humanities. Participants will become familiar with selected texts in fiction, narrative nonfiction, philosophy, and sociology, as well as excerpts from film, music, and visual art. They will be challenged to think differently about what it means to be a physician in terms of all the stories that converge in

treating people who are ill. Residents will gain specific narrative competencies in approaching and participating in patients' stories, and will work together to interrogate the story medicine tells about itself. Residents will also have individualized coaching in writing and will have the opportunity to develop their writing from this month into a scholarly work. The curriculum of the elective will run for three weeks, with the final week of the elective used for vacation, research, or subspecialty clinic time (vacation cannot be taken during the first three weeks). This elective is available to all tracks of internal medicine and Med-Peds learners.

- **Location:** UCH
- **Ambulatory %:** 0 (no call or weekends)
- **Reviewed/Revised:** 1/25/2021

- **Denver Health Urgent Care**

- **Director/Coordinator:** Dr. Lindsey Fish (Lindsey.Fish@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** PC Elective – Primary care residents will get priority but all tracks will be considered.
- **Description:** Denver Health now offers two different settings for providing urgent care services. In both settings, there is a wide variety of cases in medicine, surgery, gynecology, orthopedics and other fields. This elective offers a unique experience that most internal medicine residents don't get elsewhere in their training. The Adult Urgent Care Clinic is a busy urgent care center that works in conjunction with the Emergency Department to provide urgent care to adult patients. The Adult Urgent Care Clinic has the resources of the hospital including advanced imaging and specialist consultations. The Southwest Family Health Center Urgent Care Clinic is an urgent care clinic in a new Denver Health Primary Care Clinic which treats patients of all ages. The resources at Southwest are more limited but include x-ray radiology and labs. You may have the opportunity to work with the dental department, podiatry and sports medicine in this setting. Resident autonomy and independent decision-making are stressed. In both settings, you will see a broad spectrum of acute and sub-acute conditions that will present to your office as a practicing general internist, often requiring entirely different management skills than you have acquired on the wards. You will suture lacerations, perform incision and drainage of abscesses, diagnose acute appendicitis, tap a hot joint, manage a complication of early pregnancy or treat a straightforward case of strep pharyngitis. Residents tell us our biggest strengths are our great staff, tremendously varied patient population and wide variety of medical conditions treated. The schedule of 40-45 hours per week will be primarily Monday through Friday business hours, but may include occasional evening or weekend shifts to ensure there are only one or two residents in the clinic at a time. For questions regarding the urgent care rotation, please contact Dr. Lindsey Fish at Lindsey.Fish@dhha.org.
- **Location:** DH Pena Urgent Care Clinic, Adult Urgent Care Clinic
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/2021

- **Denver Health Virtual Hospital at Home**

- **Director:** Dr. Patrick Ryan (Patrick.Ryan@dhha.org)
- **Description:** In this rotation, residents will gain first hand experience in the management of COVID-19 infections through a unique and novel care delivery mechanism. While hospital at home programs have been around for many years, the DH Virtual Hospital at Home (VHH) provides 100% telehealth care to COVID-19 affected patients in an urban safety-net setting. Residents will perform "virtual rounds" through telehealth encounters on patients with COVID-

19 infections and risk factors for severe disease courses. As these patients have risk factors for decompensation, residents will also perform focused management of issues such as diabetes, hypertension, CHF and COPD. At the end of the rotation, residents will have improved knowledge and confidence in the outpatient management of COVID-19 infections and experience in the care delivery redesign to address an emerging pandemic. The VHH operates 7 days a week from 8:00 AM – 5:00 PM.

- **Location:** Denver Health
- **Ambulatory %:** 100
- **Reviewed/Revised:** 5/26/2020

- **Dermatology at Kaiser**

- **Director:** Dr. Tina Suneja (tina.x.suneja@kp.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to PC residents
- **Description:** This one month of out-patient dermatology clinic in a multi-specialty group setting is one of our most popular! Residents achieve independence with basic dermatology diagnosis, treatment and biopsy procedures.
- **Location:** Kaiser
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/21

- **Dermatology/Podiatry/Wound**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to PC residents
- **Description:** Emphasizes dermatology clinics at VA and UCH including lectures. It may also include wound clinic, podiatry clinic and foot & ankle center at UCH. Earliest start is late-August
- **Location:** UCH, VA
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/21

- **Ambulatory Endocrinology at Denver Health**

- **Director:** Dr. Rocio Pereira (Rocio.Pereira@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to PC residents
- **Description:** Residents will work in a variety of outpatient endocrinology settings based in Denver Health's urban safety net ambulatory care. Residents will work with faculty and interprofessional teams with a focus on endocrine/metabolic disorders ranging from diabetes, thyroid and parathyroid disorders, pituitary and adrenal disorders, bone mineral disease, and obesity. There will be significant focus on metabolic disorders, specifically, assessment, investigation, and management of diabetes. Residents will spend time in endocrinology consult clinic at the main Denver Health hospital as well as satellite community clinics within 20 minute drive of DH campus (ability for own transportation recommended). Residents will work closely with faculty as well as nurses/nutritionists to learn and be able to counsel patients in glucometer teaching, nutritional guidance, carbohydrate counting, and insulin pump management. They will

have opportunity to spend time with the Denver Health Diabetes Prevention Program. Great elective opportunity for residents with particular interest in managing chronic metabolic diseases in underserved populations and investigating resource access for vulnerable patients.

- **Location:** DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/7/2020

- **Endocrinology**

- **Director:** Dr. Liz Thomas (Elizabeth.Thomas@CUAnschutz.edu)
- **Coordinator:** Caroline Whitaker (Caroline.Whitaker@CUAnschutz.edu)
- **Description:** Residents will see patients in Endocrine clinics 4-5 half days per week (University of Colorado Hospital Anschutz Outpatient Pavilion and Denver VAMC) and inpatient consult rounds 4-5 half days per week. Residents will see new and follow-up consults on patients with a variety of endocrine/metabolic disorders including endocrine tumors (pituitary, adrenal, pancreatic), thyroid dysfunction, thyroid nodules and cancer, dyslipidemia, osteoporosis, disorders of calcium metabolism, hypopituitarism, male and female gonadal disorders, transgender, obesity, endocrine hypertension, diabetes (all types), and adrenal insufficiency. They will be part of a team consisting of 3 first-year endocrine fellows, 0-2 residents, and 0-2 medical students. There is no night or weekend call. Residents are expected to attend the weekly Endocrine Grand Rounds, weekly Journal Club, and monthly endocrine conferences including multidisciplinary thyroid/parathyroid conference, multidisciplinary pituitary conference, Diabetes clinical conference, and Metabolic Bone conference. For interested residents, 1-2 half days of inpatient glucose management team consult service can be arranged if enough advance notification is provided.
- **Location:** UCH, VA
- **Ambulatory %:** 60
- **Reviewed/Revised:** 1/25/2021

- **Endocrinology/Rheumatology Combined Elective (2-week traditional Endocrinology elective in combination with 2-week inpatient Rheumatology elective)**

- **Directors:** Dr. Liz Thomas (Elizabeth.Thomas@CUAnschutz.edu) and Dr. Jen Stichman (Jennifer.Stichman@DHHA.org)
- **Coordinators:** **Endocrine:** Caroline Whitaker (Caroline.Whitaker@CUAnschutz.edu) and **Rheumatology:** Becky Alberti-Powell (Becky.Alberti-Powell@ucdenver.edu)
- **Description:** Residents will do 2 weeks of inpatient Endocrinology elective preceded or followed by 2 weeks of inpatient Rheumatology.
 - **Endocrinology:** During the Endocrinology elective, residents will see inpatient Endocrinology consults at the University of Colorado Hospital Anschutz Medical Campus. Residents will see new and follow-up inpatient consults on patients with a variety of endocrine/metabolic disorders including endocrine tumors (pituitary, adrenal, pancreatic), thyroid dysfunction, thyroid cancer, dyslipidemia, osteoporosis, disorders of calcium metabolism, hypopituitarism, endocrine hypertension, diabetes (all types), and adrenal insufficiency. They will be part of a team consisting of 3 first-year endocrine fellows, 0-2 residents, and 0-2 medical students. There is no night or weekend call. Residents are expected to attend the weekly Endocrine Grand Rounds, weekly Journal

Club, the monthly endocrine conferences: multidisciplinary thyroid/parathyroid conference, multidisciplinary pituitary conference, Diabetes clinical conference, Metabolic Bone conference, and other conferences deemed relevant. For interested residents, 1-2 half days of inpatient glucose management team consult service can be arranged if enough advance notification is provided.

- **Rheumatology:** For this rotation, the resident will work at the UCH Health Anschutz Campus, and serve as the primary rheumatology consultant for patients assigned to them. They will work with the rheumatology fellow to identify patients that the resident will evaluate on either an outpatient or inpatient basis. The resident will then perform the initial evaluation and discuss the diagnostic and management plan with the rheumatology fellow and attending, follow the patient(s) as appropriate, and perform appropriate medical documentation. It is estimated that the resident will spend ~60% of their time performing urgent outpatient evaluations (clinic or emergency room), and 30% with inpatient evaluations. In addition, they will have approximately ½ day a week of rheumatology education at TUESDAY AM conferences. The resident's duty hours will be approximately 730 AM to 530 PM Monday through Friday. They will NOT perform overnight or weekend call.

- **Location:** UCH
- **Ambulatory %:** 30
- **Reviewed/Revised:** 1/25/2021

- **Gastroenterology Inpatient**

- **Director:** Dr. Paul Menard-Katcher (Paul.Menard-Katcher@CUAnschutz.edu)
- **Coordinator:** Barbara Caufield (Barbara.Caufield@CUAnschutz.edu)
- **Description:** Based on a 5 days/week, no night-call schedule with Departmental and/or Divisional conferences and continuity medical clinics as scheduled. Residents will be assigned to UCH where they will become a component of the in-patient consultation team that includes at least one fellow and one faculty member. Residents will see new consultations as well as follow up consults on patients with a variety of gastrointestinal conditions including: gastrointestinal hemorrhage (upper and lower GI bleeding), abdominal pain, Inflammatory Bowel Disease (IBD), anemia, abnormal liver associated enzymes, abnormal imaging, nausea and/or vomiting, diarrhea, odynophagia/dysphagia and pancreatitis. Residents are expected to attend weekly GI grand rounds (Friday 7AM), IBD conference (Tuesday noon) and other conferences deemed relevant. Assuming no conflicts with other required educational conferences, each resident/student will be assigned to 1-2 outpatient ½ day GI clinics to be determined at the beginning of the rotation based on resident interest. At the start of each month, residents will arrange a meeting with Dr. Menard-Katcher (paul.menard-katcher@cuanschutz.edu) to discuss specific interests in Gastroenterology to better tailor the elective.

- Basic Goals of the Elective will be:

- Exposure to the most common conditions resulting in inpatient Gastroenterological consultation
- Learn the procedural interventions available to the Gastroenterologist and to understand the risks, benefits and indications for GI procedural intervention
- Exposure to common chief complaints and evaluations in the outpatient Gastroenterology setting
- Understand the indications for outpatient/open-access GI procedures

- **Location:** UCH
- **Ambulatory %:** 20
- **Reviewed/Revised:** 3/5/2020

- **Gastroenterology Outpatient**

- **Director:** Dr. Paul Menard-Katcher (Paul.Menard-Katcher@CUAnschutz.edu)
- **Coordinator:** Barbara Caufield (Barbara.Caufield@CUAnschutz.edu)
- **Restrictions:** Upper Level residents only.
- **Description:** Outpatient rotation designed for senior residents with a subspecialty consultant career interest. Residents will provide outpatient consultations for 3-4 ½ days per week and observe a variety of endoscopic procedures for 2-3 ½ days per week. Schedules will be tailored to resident interest and involve experience in both general gastroenterology and with GI faculty with diverse sub-sub-specialty expertise (esophageal disorders, inflammatory bowel disease, obesity, anorectal disorders). Additional clinical exposure to GI physiology studies (esophageal and anorectal manometry, ambulatory pH studies, capsule endoscopy) is also possible. There may be opportunity for experience using an endoscopic skills simulator. Residents will be expected to present a Quality Improvement Project proposal to rotation supervisor and GI section chief at end of rotation. Residents are also expected to attend weekly conferences including IBD conference and GI Grand Rounds. 1 month before start of elective residents will arrange a meeting with Dr. Menard-Katcher (paul.menard-katcher@ucdenver.edu) to discuss specific interests in Gastroenterology to better tailor the elective.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/22/2020

- **Gastroenterology at Denver Health**

- **Director:** Dr. Courtney Bhat (Courtney.Bhat@dhha.org)
- **Description:** The Denver Health Gastrointestinal Rotation for Interns and Residents is designed to provide both an inpatient and outpatient GI experience. Physicians on the rotation will work directly with the first year GI fellow and the GI faculty attending on the inpatient service. Outpatient clinic exposure will be with faculty members both in luminal gastroenterology and hepatology. The percentage of inpatient/outpatient exposure will be determined on an individual basis to meet residency training requirements. Physicians expressing a desire to gain experience in flexible sigmoidoscopy will be provided training when possible. This rotation is 5 days/week, no night call, no weekends, and rotating physicians will not be expected to stay later than 5 PM on this elective unless they choose to do so. We welcome all residents, whether interested in GI/Hepatology careers (multiple previous residents have ended up as GI fellows at CU and other institutions) or residents who want to expand their knowledge of our specialty.
- **Location:** DH
- **Ambulatory %:** 0-100, depending on resident preference
- **Reviewed/Revised:** 3/5/2020

- **Hepatology Outpatient**

- **Director:** Dr. Lisa Forman (Lisa.Forman@CUAnschutz.edu)
- **Coordinator:** Barbara Caufield (Barbara.Caufield@CUAnschutz.edu)
- **Restrictions:** Upper Level residents only.
- **Description:** Based on a 5 days/week, no night-call schedule with Departmental and/or Divisional conferences and continuity medical clinics as scheduled. One resident will be assigned to the hepatology clinic during months where there are no fellows assigned to outpatient hepatology. At the beginning of the rotation the resident will receive and are expected to read

two handbooks including a set of core articles. The residents will shadow and then see primarily new patients (but also some return visits) that are seen in hepatology. This will include both pre-transplant and post-transplant clinics. Residents will present the cases to the attending and the attending will discuss areas of physical exam, differential diagnosis and management. Residents will gain experience evaluating such diseases as HCV, HBV, autoimmune hepatitis, hepatocellular carcinoma, abnormal LFTs and liver masses. In addition they will manage complications of cirrhosis. Clinics are held 5 days/week, morning and afternoon. Residents also are required to attend weekly transplant selection meetings, pathology conference, and hepatobiliary conference.

- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/9/2019

- **Heme Malignancy and Bone Marrow Transplant**

- **Director:** Dr. Jonathan Gutman (Jonathan.Gutman@CUAnschutz.edu)
- **Description:** For residents interested in learning more about blood cancers and stem cell transplantation, we are excited to offer this one month rotation. We have flexibility as to structure of the month and can consider a dedicated inpatient experience versus 2 weeks inpatient and 2 weeks outpatient. On the inpatient service, residents will be primary providers for patients undergoing stem transplants, leukemia inductions, or management of other heme malignancy complications. In the clinic, residents will have the opportunity to see patients with all major heme malignancy diagnoses, including new patient visits, and then staff them with attending physicians. Beginning summer 2017, all residents will participate in a 2 week outpt heme/heme malignancy rotation, and this elective will offer the opportunity to expand that experience for those with particular interest in the field.
- **Location:** UCH
- **Ambulatory %:** 100 or 50
- **Reviewed/Revised:** 3/12/2020

- **HIV and Urban Underserved Elective**

- **Director:** Dr. Mariah Hoffman (Mariah.Hoffman@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Description:** Outpatient 3-4 week elective offered for those who wish to learn chronic care of patients living with HIV and the significant issues of underserved populations that can affect HIV care. Elective content will be based on the areas of HIV, substance abuse, hepatitis C and the social determinants that shape their health outcomes. Clinical sites will include HIV and infectious disease clinics across Denver, substance abuse clinics (with education with medication-assisted treatment such as methadone and buprenorphine treatment), HIV testing community sites, correctional care facilities, and harm reduction center to name a few. Didactics, case discussions, and journal clubs will also be incorporated into this diverse clinical experience. With completion of the elective, residents will have the knowledge and skills to provide guideline-based preventive care specific to HIV patients, initiate anti-retrovirals, manage complications of treatment including viral resistance, and manage chronic co-morbidities. Residents will also have increased exposure in working with underserved populations such as patients with psychiatric disease, correctional care, LGBTQ, and substance use disorders. This is a required rotation for PC residents who wish to enter the HIV longitudinal program, but is open to all interested.
- **Location:** DH

- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/25/2021

- **Hospitalist Preceptorship Elective (PEAK)**

- **Director:** Dr. Manuel Diaz (Manuel.Diaz@CUAnschutz.edu)
- **Description:** Autonomy, one-on-one attending exposure, and an emphasis on education over service has led residents to report that HTT-Peak was one of the best months of residency! All residents considering a hospitalist career or working as a hospitalist before fellowship should rotate through this month, which is designed to simulate the job of a community hospitalist. Residents who rotate will develop their skills as an autonomous physician and will better understand the excitement, enjoyment, and challenges of hospitalist work. Utilizing a community hospitalist model, the resident will work closely with 1-2 attendings for the month. They will rotate typically on a usual hospitalist model of 5-7 days on and 5-7 days off. The resident service is capped to allow ample educational time. The month emphasizes 1:1 mentorship with a faculty member (many of whom serve as leaders in the hospital and health system) and includes a dynamic lecture series covering issues such as billing and coding (residents will do the billing for the month to better learn this skill and enhance their future salary), improving work efficiency, transitions of care, resource utilization, working with mid-level providers, quality metrics, personal performance improvement, and health systems leadership. In summary, residents have told us that the experience and mentorship they received on the rotation were instrumental in them getting the jobs they want in the location they want in academic and community hospitals - including in transition before fellowship. Non-hospitalist program residents may take vacation during this month. Contact: Manny Diaz, MD at University Hospital.
- **Location:** UCH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/22/2019

- **Hospitalist Rotation Private, Rose Medical Center**

- **Director:** Dr. Andrew Koch (AndrewSKoch@gmail.com)
- **Restrictions:** Upper Level residents only.
- **Description:** This rotation is designed for second- and third-year residents who are interested in exploring private hospital medicine practice. There is heavy emphasis on autonomy, decision making and time management. Our curriculum is designed to complement, not replicate the University Hospitalist month. In addition to picking up patients each morning, the resident will provide inpatient consultations and do 1-2 admissions per day. Daily activities include reviewing notes and daily billing and identifying ways to improve efficiency. Teaching by both the attending and the resident is expected. One of our primary goals is to encourage self-reflection and to assist the resident in identifying his or her practice style and approach to management in order to make the transition to attending physician.
- **Location:** Rose
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/9/2019

- **Infectious Disease Consults**

- **Director:** Carlos Franco-Paredes, MD (Carlos.Franco-Paredes@CUAnschutz.edu)
- **Coordinator:** Kelly Rico (Kelly.Rico@CUAnschutz.edu)

- **Description:** Residents have the opportunity to work on a variety of ID consult services at UCH or DHMC. Residents are encouraged to request a specific service that meets their interests including the UCH General ID consult service, the UCH Transplant ID consult service, or the General ID consult service at DHMC. Hours are 8AM to 6PM, Monday through Friday. Residents work closely with the ID Faculty, ID Fellow, medical students, ID pharmacy team, and the Microbiology Laboratory to care for a variety of patients on services throughout the hospital (e.g., Medicine, Oncology, Neurology, OB-GYN, MICU, SICU, Neurosurgery, Solid Organ Transplant and Bone Marrow Transplant). Inpatient caseload is typically 1-2 new consults/day and 4-5 follow-up patients. Residents are required to attend all conferences in both Medicine and Infectious Diseases including the Infectious Diseases Lecture Series (4th Tuesday of each month, 7:30a-12:00p), Wednesday Case Management Conference (7:30a) and Infectious Diseases Grand Rounds (8:30a), and Monday and Friday Microbiology rounds (11:00a). For specific rotation requests or for additional information on specific ID consult services, please contact Kelly Rico at 303-724-4932 or Kelly.Rico@cuanschutz.edu.
- **Location:** UCH, DH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 3/5/2020

- **Infectious Disease Outpatient**

- **Director:** Carlos Franco-Paredes, MD (Carlos.Franco-Paredes@CUAnschutz.edu)
- **Coordinator:** Kelly Rico (Kelly.Rico@CUAnschutz.edu)
- **Description:** This is an outpatient ID elective that is designed to provide internal medicine residents with a comprehensive experience in outpatient infectious diseases. Residents will be assigned to complete two weeks of outpatient ID clinic at UCH and at DHMC. The resident will work closely with assigned clinic providers Monday-Friday, 8AM-6PM, to provide specialized infectious disease care for a variety of patients including: HIV patients, ID outpatient consults, Outpatient Antimicrobial Therapy (OPAT) patients, Transplant Infectious Diseases, TB patients at DPH, and other rotating specialty clinics. For rotation requests or additional information, contact Kelly Rico at 303-724-4932 or Kelly.Rico@CUAnschutz.edu.
- **Location:** UCH, DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 2/3/2020

- **Medical Educators Elective**

- **Director:** Dr. Eric Young (Eric.Young@CUAnschutz.edu)
- **Restrictions:** This rotation is offered twice per year. Only 2 residents can be accommodated during each session.
- **Description:** This elective will provide residents and fellows with the knowledge, attitudes, and teaching skills necessary for an academic teaching physician. The course has three components. The first component is a series of workshops and lectures that introduce fundamentals of teaching. The second component is a teaching practicum for applying newly learned skills. The third component is a project for trainees to develop and apply their teaching skills to an area of their choice (curriculum development, procedural teaching, etc). Specific elective goals include:
 - 1. To develop teaching skills
 - 2. To encourage resident and fellow engagement in medical education
 - 3. To promote excellence in medical education
 - Elective Design:

- The first week may be used for project development, vacation, or clinic time. The second week is a series of workshops. The third and fourth weeks include required teaching practicum (see below), didactics, and time to work on projects.
 - **Course Content:**
 - **I. Workshops/Lectures:**
 - The workshops will be led by faculty with experience in each topic. The workshops are designed to be interactive and allow for practicing new skills. Examples of workshops offered include:
 - Understanding How Learning Styles Impact the Way You Teach
 - Teaching at the Bedside
 - Teaching Procedural Skills
 - Teaching in a Clinical Setting
 - Learner/Trainee Assessment
 - Giving an “On the Fly” Lecture
 - Teaching to a Large Group
 - Small Group Facilitation
 - Giving Effective Feedback
 - Your Future Career as a Medical Educator
 - **II. Teaching Practicum:**
 - There are multiple opportunities for teaching practicum in the clinic and classroom setting. Teaching practicum opportunities include, but are not limited to:
 - Foundations of Doctoring- teaching medical students communication and physical exam skills
 - Leading 3rd and 4th year medical student small groups
 - Bedside rounding
 - Giving morning report or a specialty specific conference
 - **III. Project:**
 - Residents and fellows will design and implement a “medical education” project specific to their residency or fellowship program. Trainees will identify a project and project mentor prior to the start of the elective with the assistance of the Academy of Medical Educators and/or assistance of training program. The project will allow trainees to implement their skills in an area of interest. Possible projects include:
 - Designing a formal evaluation/feedback tool for residents and fellows giving a journal club, ground rounds, or specialty specific conference
 - Creating a formal opportunity to be observed and receive feedback on bedside teaching
 - Designing and giving a conference or workshop on teaching skills for a specific specialty (i.e. Teaching procedural skills, Giving and receiving feedback, etc.)
 - Developing a workshop for medical student interest groups (i.e. Reading ECGs, Airway management, Central Lines, Pediatric exam, etc.)
- **Location:** UCH
 - **Ambulatory %:** NON-CLINICAL
 - **Reviewed/Revised:** 1/20/2021

- **Adult Medical Genetics**

- **Director:** Dr. Matthew Taylor (Matthew.Taylor@CUAnschutz.edu)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@CUAnschutz.edu)

- **Restrictions:** This rotation is very limited. Contact Dr. Taylor for availability.
- **Description:** An outpatient clinical rotation designed to expose the internist in training to adult medical genetics practice covering: diagnosis, physical exam of genetic patients, molecular genetic analysis, pharmacogenetics, therapy of rare genetic disorders, and the interface between translational science and clinical genetics practice. As medical genetics is generally unfamiliar to many internists, this rotation is designed to help bring internists into the 21st century and be prepared to engage in genomic and precision medicine.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/2021

- **Medical Oncology**

- **Director:** Dr. Chris Geiger (Christopher.Geiger@CUAnschutz.edu)
- **Description:** This is a 4-week outpatient elective at the University of Colorado Cancer Center; an NCI-designated comprehensive cancer center and a member of the NCCN network. Residents will rotate through a variety of outpatient subspecialty oncology clinics to gain exposure to common solid tumor malignancies. Residents will learn about solid tumor etiology, epidemiology, and pathophysiology, as well as clinical presentation and natural history of common cancers, and the potential risks and benefits of various treatment options. The resident will coordinate with rotation director Dr. Chris Geiger to devise a tailored schedule based on the resident's specific areas of interest prior to rotation start.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/25/2021

- **Medical Policy and Legislation**

- **Director:** Dr. Michael Brunnquell (Michael.Brunnquell2@dhha.org)
- **Description:** Medical policies at the state and national level help shape almost every aspect of healthcare. There is a constant conversation being had that directly impacts our profession and our patients, but many physicians listen along without knowing that they have an important seat at the table. This elective aims to familiarize young physicians with modern medical policy, current events, and the process by which policy is formed. This is a split didactic-experiential elective that has partnered with the Colorado Medical Society. For two weeks, residents will have the opportunity to interact with state-level senators, representatives, and lobbyists at the state capitol during the legislative session. In addition, residents will participate in lectures and weekly journal clubs pertaining to all things policy including reimbursement models, state policy hot-topics, and leadership skills. Evaluation will be based on a portfolio of deliverables created throughout the course as well as a reflective piece. The final two weeks of the elective will be either research time or subspecialty clinic time. Please note that residents who opt for a subspecialty clinic must arrange their own mentor and clinic time. Additionally, vacation can only be taken during the second two weeks (during research or subspecialty clinic). This elective is only offered during February-April each year and is available to all tracks of internal medicine learners.
- **Location:** DH, Colorado Capitol
- **Ambulatory %:** NON-CLINICAL
- **Reviewed/Revised:** 1/26/2021

- **MKSAP**
 - **Coordinator:** Nicole Goodwin (Nicole.Goodwin@CUAnschutz.edu)
 - **Restrictions:** Special approval from Program Director required.
 - **Description:** Residents may request a board review elective during their parental leave. Residents will be eligible for this elective if they are on track to meet their ACGME and ABIM requirements (1/3 of training in the ambulatory setting and a maximum of 3 non-clinical months). Residents who participate in this elective will be required to complete MKSAP practice tests and turn them into the housestaff office on a pre-determined schedule.
 - **Location:** N/A
 - **Ambulatory %:** NON-CLINICAL
 - **Reviewed/Revised:** 1/14/2019

- **National Jewish Critical Care Service at Rose Medical Center**
 - **Director:** Dr. Elaine Schwartz (SchwartzE@NJHealth.org)
 - **Description:** Residents will work one-on-one with the National Jewish critical care faculty in the Rose Intensive Care Unit, a 21 bed, mixed medical-surgical-cardiovascular ICU. As such the medical residents will gain exposure to the full range of critical care including post-operative general surgery and cardiovascular surgery patients, neurology and neurosurgery patients, and OB/GYN patients as well as medical patients with critical illness. Residents will gain extensive exposure to ICU procedures including central line placement, arterial line placement, intubation, thoracentesis and paracentesis. The schedule is 5 days per week, no night call.
 - **Location:** Rose
 - **Ambulatory %:** 0
 - **Reviewed/Revised:** 2/25/2019

- **Nephrology Ambulatory**
 - **Director:** Dr. Erik Stites (Erik.Stites@CUAnschutz.edu)
 - **Coordinator:** Debbie Hunt (Deborah.2.Hunt@CUAnschutz.edu)
 - **Description:** Residents participating in the ambulatory nephrology elective will rotate through general nephrology clinics (5 half-days per week), renal transplant clinic (2 half-days per week), and home dialysis clinic (1 half day per week). Outpatient clinics take place at Denver Health Medical Center and The University Hospital. This diverse ambulatory experience will offer residents exposure to a wide variety of renal disorders commonly encountered in the ambulatory setting including chronic kidney disease, glomerulonephritis, nephrolithiasis, hematuria, proteinuria, hypertension, preparation for and management of end stage renal disease, as well as frequently encountered complications following renal transplantation. Residents will also participate in weekly attending didactic lectures and daily educational morning conferences. No night or weekend call. This rotation is ideal for residents pursuing a primary care pathway.
 - **Location:** UCH, DH
 - **Ambulatory %:** 100
 - **Reviewed/Revised:** 1/25/2021

- **Nephrology Combined Consult/Ambulatory**
 - **Director:** Dr. Erik Stites (Erik.Stites@CUAnschutz.edu)
 - **Coordinator:** Debbie Hunt (Deborah.2.Hunt@CUAnschutz.edu)

- **Description:** This elective is designed for medical residents wishing to gain further experience in both inpatient and outpatient-based nephrology. This rotation consists of: 1) 2 weeks of inpatient renal consult-based medicine at either Denver Health Medical Center or University Hospital where residents can expect to perform initial consults and follow up care for frequently encountered inpatient renal disorders as part of a team; and 2) 2 weeks of ambulatory nephrology and renal transplant clinic experience which involves a diverse combination of clinics at DHMC and UCH. This elective will provide opportunity for residents to become more familiar with a variety of renal disorders that commonly include acute kidney injury, chronic and end-stage kidney disease, proteinuria, hematuria, glomerulonephritis, acid base and fluid/electrolyte disorders, and post renal transplant immunosuppression and complications. Residents will also participate in weekly attending didactic lectures and daily educational morning conferences. Hours are 8 or 9am-5pm Monday-Friday without night or weekend call. This is an ideal rotation for residents contemplating a future fellowship in nephrology.
- **Location:** UCH, DH
- **Ambulatory %:** 50
- **Reviewed/Revised:** 1/25/2021

- **Nephrology Inpatient Consult**

- **Director:** Dr. Erik Stites (Erik.Stites@CUAnschutz.edu)
- **Coordinator:** Debbie Hunt (Deborah.2.Hunt@CUAnschutz.edu)
- **Description:** Residents rotating on the Nephrology Inpatient Consult Elective will work closely with the renal consult team at either Denver Health Medical Center or University Hospital. Residents will gain experience in the diagnosis and management of renal disorders and procedures frequently encountered in the inpatient setting that include acute kidney injury, fluid/electrolyte disorders, acid/base disorders, emergent hypertension, continuous renal replacement therapy, and renal biopsy. The high-volume renal consult services at both DHMC and UCH offer exposure to a large variety of renal disorders commonly seen in both acute care and floor medicine settings. Residents will work as part of a team consisting of attending, fellow, and 0-2 medical students. Residents will also participate in weekly attending didactic lectures and daily educational morning conferences. Hours are 8 or 9am-5pm Monday-Friday without night or weekend call. This is an ideal rotation for residents pursuing the hospitalist track, or those interested in critical care or cardiology fellowships.
- **Location:** UCH, DH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/25/2021

- **Obesity Medicine**

- **Director:** Dr. Marc Cornier (MARC.CORNIER@CUANSCHUTZ.EDU)
- **Description:** This portion of the elective will introduce residents/fellows to Obesity Medicine. They will have the ability to rotate through the Wellness Clinic at The Anschutz Health and Wellness Center, University of Colorado Bariatric Clinic, Children's Hospital Bariatric Clinic and University of Colorado Lipid Clinic. They will be exposed to behavioral change techniques, pharmacologic and surgical management of weight loss and weight maintenance. This is an outpatient elective and requires no call or weekends.
- **Location:** Anschutz Health & Wellness Center
- **Ambulatory %:** 100
- **Reviewed/Revised:** 6/16/2020

- **Palliative Care and Hospice**

- **Director:** Dr. Jeanie Youngwerth (Jean.Youngwerth@CUAnschutz.edu or 720-848-8530)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** PC Elective – Primary care residents will get priority but all tracks will be considered.
- **Description:** This month is designed to provide the resident with exposure to both palliative care and hospice experiences, including inpatient/outpatient hospice, and hospital palliative care consultative services (University Hospital with options for ambulatory care). The focus of the rotation is on care for the seriously ill and their loved ones. Skills covered include acute pain and non-pain symptom management, advanced communication and complex family meetings, goals of care clarification, advance care planning, end-of-life transitions, and the interdisciplinary team approach to serious illness. Residents will integrate into the interdisciplinary team for the care of patients. Didactic education sessions twice weekly, in addition to weekly palliative medicine conferences. There are no weekend or evening call responsibilities.
- **Location:** UCH, Lutheran Hospice Collier Center (DH)
- **Ambulatory %:** 25-50
- **Reviewed/Revised:** 1/20/2021

- **Public Health Practice Elective**

- **Director:** Julie Venci (Julie.Venci@dhha.org)
- **Coordinator:** Akemi Iwanabe (AKEMI.IWANABE@CUANSCHUTZ.EDU)
- **Restrictions:** Only offered October and March
- **Description:** This elective provides residents a very practice-oriented exposure to the work of public health in the Denver metro area through time spent working with public health professionals in a variety of contexts. About half of time (approximately 2 weeks) will be project-based work contributing meaningfully to CDPHE's disease control efforts (e.g. disease surveillance, guideline development, or outbreak response). Other experiences will occur through Denver Public Health and associated clinics (e.g. TB or STI clinic). These experiences will be supplemented with didactic educational sessions, independent learning periods, and time for individual project work.
- **Location:** CDPHE, Denver Public Health, Denver Health TB clinic, Denver Health STI clinic
- **Ambulatory %:** 20
- **Revised/Reviewed:** 4/10/2021

- **Point of Care Ultrasound for the Hospitalized Patient (POCUS)**

- **Director:** Dr. Amiran Baduashvili (Amiran.Baduashvili@CUAnschutz.edu)
- **Restrictions:** HTT interns and HTT R3s
- **Description:**
 - Learning Objectives:
 - Illustrate how to apply point of care ultrasound techniques to diagnose common clinical conditions encountered within internal medicine training.
 - Understand how the use of point of care ultrasound can enhance diagnostic reasoning, including an understanding of test characteristics (sensitivity, specificity, likelihood ratios, ROC curves).
 - Apply ultrasound techniques to the care of hospitalized patients.

- Description:
 - This is an elective focused on the application and practice of point of care ultrasound, in order to diagnose and evaluate common clinical conditions encountered within internal medicine. The elective is comprised of daily didactic sessions focused on the use of ultrasound to enhance diagnostic reasoning for each organ system, including: urogenital, pulmonary, cardiac, venous, and abdominal. Each didactic session will include the use of videos to demonstrate practical techniques, followed by experiential application of the skill at the patients' bedside. At the end of the elective, each resident will be asked to deliver a 15-20 minute presentation on a clinical question related to a patient encounter, the ultrasound images that were obtained to address this question, and how these images and the use of ultrasound changed the diagnostic or therapeutic plan.
 - To be combined with 2 weeks of Understanding Health Systems.
 - **Location:** UCH
 - **Ambulatory %:** 0
 - **Reviewed/Revised:** 1/25/2021
- **Point of Care Ultrasound for the Hospitalized Patient (POCUS) 2.0**
 - **Director:** Dr. Julia Limes (Julia.Limes@CUAnschutz.edu)
 - **Restrictions:** The resident has already completed one of the POCUS electives or a POCUS course.
 - *Resident will need to complete a POCUS 2.0 Mentor Form & return to Julia Limes for approval prior to rotation start.*
 - Description: This 2-4 week elective is designed to enhance image acquisition and interpretation skills in addition to Image portfolio building that can be used to obtain SHM Point-of-care Ultrasound Certificate of Completion. This will be achieved primarily through unsupervised image acquisition and weekly image review with an attending physician with POCUS experience. This course will be available to residents who have already completed either the POCUS for the Hospitalized Patient elective, the Master Clinician Elective, or who have prior experience with ultrasound.
 - Objectives:
 - To provide medical residents with structured time to work toward obtaining SHM Point-of-Care Ultrasound Certificate of Completion
 - To provide medical residents with formal instruction on image optimization and interpretation by an attending physician with POCUS experience.
 - To prepare medical residents for teaching co-residents and medical students the utility of bedside ultrasound and basic knobology of POCUS.
 - Requirements:
 - The resident has already completed one of the POCUS electives or a POCUS course.
 - The resident will identify a POCUS mentor who is willing to review images and give feedback at a weekly image review and will gain approval from Dr. Julia Limes and Nicole Goodwin.
 - The resident will complete all of the online modules through SHM and will submit the certificate of completion.
 - The resident will attend one of the 2 day courses provided through SHM.
 - The resident will review 60 of images with the faculty mentor each week.
 - Residents will engage with the POCUS trained attendings to help teach residents, which could include a small group session, developing an online module, or providing image review guidance.

- **Location:** UCH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 4/20/2020

- **Primary Care – Practical Orthopedics for Internal Medicine**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to Primary Care residents and limited to one resident per month.
- **Description:** This popular rotation has been rated as one of the most valuable outpatient experiences. Practical experience with a personable, superb clinician-educator with Dr. Ted Parks. Learn excellent joint exam skills and injection techniques, plus the opportunity to go to the OR and understand what primary care physicians need to know before referring a patient for elective orthopedic surgery. Additional opportunity to spend a couple of sports medicine clinic sessions with a DH or University physician for interested residents.
- **Location:** Western Orthopaedics (majority), University/DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/08/21

- **PC Practice Setting Exploration: Internal Medicine Clinic (Cherry Creek) CU Denver**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to R2 and R3 PC residents with PC PD's approval
- **Description:** An excellent opportunity to participate actively in a busy 6 internist, 1 NP community-based practice located at 360 S. Garfield St, Suite 500, Denver, CO 80209. Our clinic is uniquely positioned as a CU School of Medicine clinic that is not located on the hospital campus. The clinic was in private practice until November 2015 when it joined CU. We have the benefit of running like a private practice, yet having the backing and resources of the University, including running Epic. We are also fortunate enough to have a case manager, integrated behavioral health, and clinical pharmacy on site as part of the practice. Multiple opportunities to learn outpatient management, joint injections, skin biopsies, etc. Learn to code, refer, schedule testing, pre-authorize, use superbills, and understand the business of outpatient practice. Opportunity to participate in ongoing process improvement/PCMH meetings while at the clinic. A terrific opportunity to get accustomed to practicing in the real world. This rotation is open to residents looking for a better understanding of outpatient internal medicine practice. Site contact Dr. Robert Doolan, 303-315-6046, Robert.doolan@ucdenver.edu
- **Location:** Denver Practice
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **PC Practice Setting Exploration: Kaiser Month**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to R2 and R3 PC residents with PC PD's approval Director's approval
- **Description:** Kaiser Permanente is a non-profit integrated health system (primarily HMO with some PPO and high-deductible plans) caring for more than 450,000 members in 17 clinics

throughout Denver and Boulder. Primary care internists host residents at their clinic site where the resident will work with 2-3 internists seeing patients, performing clinic-based procedures, attending CMEs and business-related meetings of interest.

- **Location:** Denver and near counties, as available
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **PC Practice Setting Exploration: Private Practice Month (Internal Medicine Clinic)**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to R2 and R3 PC residents with PC PD's approval
- **Description:** An excellent opportunity to participate actively in a busy 3 internist, 1 PA, 1 NP community-based practice located at Arapahoe and Potomac Street in Centennial with a variety of managed care plans (HMOs, PPOs, POS, and indemnity insurance). In addition, they participate with several Medicare Advantage Care Plans for seniors and participate in one of the CMS initiatives known as the Medicare Shared Savings Program (MSSP). We are also part of a large ACO managed by Physician Health Partners (over 200+ primary care physicians). Multiple opportunities to learn, joint injections, skin biopsy, etc. Learn to code, refer, pre-authorize, use superbills and understand the myriad variations of insurance reimbursement. Some exposure to overhead and traditional office expenses. Opportunities to attend peer review, medical staff leadership, nursing home directorship meetings, IPA Utilization Management and other IPA related meetings, and quality management meetings. A terrific opportunity to get accustomed to practicing in the real world. They are affiliated with the Medical Center of Aurora and Parker Adventist Hospital.
Site contacts: Dr Alan Aboaf, Burroughs, Gilmer
- **Location:** Main office in Parker, Satellite office in Aurora
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **PC Practice Setting Exploration: Private Practice Month (Rose)**

- **Director:** Dr. Yasmin Sacro (Yasmin.Sacro@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Only available to R2 and R3 PC residents with PC PD's approval
- **Description:** Busy private practice with former CU grads at Rose with the possibility of doing some treadmills during the month as well.
- **Location:** Denver
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **Preceptorship Indian Health Service**

- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Priority to PC & Upper Level Residents only.
- **Description:** Residents can take advantage of wonderful opportunities in Arizona, New Mexico, Cherokee and Alaska with the Indian Health Service. Please note these are offsite rotations and can be used to meet PC underserved preceptorship requirement in second year. Residents will practice the full spectrum of internal medicine including outpatient clinics and inpatient rounding

in this unique practice setting. During this rotation, residents live on the reservation affording them an opportunity to become fully immersed in the unique culture and community found on the reservations. Please contact Erica.Mendoza@dhha.org for the location request at the beginning of academic year, and also notify her for any change/cancellation 6 months in advance. Vacation may not be allowed.

- **Location:** AZ, NM, AK
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **Preceptorship Refugee Health**

- **Director:** Dr. Jamaluddin Moloo (Jamaluddin.Moloo@CUAnschutz.edu)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Priority to PC.
- **Description:** Global health locally! The rotation will afford residents a unique perspective to refugee populations and the many barriers faced by many immigrant and lower income patients. You will be immersed within the community setting and work directly with refugee patients and their families. Activities include home visits, outreach to senior centers and providing community based education. The rotation is unlike most clinical rotations (including those embedded within safety net systems). The experience will afford a unique understanding of the barriers faced by our patients and will help you to optimize the care of your future patients! Please reach out to Dr. Moloo with any questions.
- **Location:** Community-based
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/2021

- **Preceptorship Rural Underserved**

- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Priority to PC.
- **Description:** Residents may choose from a large number of rural clinical sites that incorporate both inpatient and outpatient medicine. Most of these sites qualify for loan repayment and are looking for new internists to join their group. We have some established Colorado rural clinic sites through our Primary Care Alumni network for resident opportunities. As long as meeting elective requirements, out of state rural clinical may be considered as well. Please request the location(s) you would like from Erica.Mendoza@dhha.org 6 to 12 months in advance.
- **Location:** rural clinical sites.
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **Preceptorship Urban Underserved**

- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Priority to PC.
- **Description:** Available at Refugee Clinic, Colorado Coalition for the Homeless (formerly Stout Street) Clinic, or Denver Health Teaching Clinic sites (Eastside, Westside, Webb, Sloans Lake). Having the opportunity to spend a month at a single site will allow residents to experience the rewards of providing primary care to underserved populations. NOTE: Stout Street Clinic takes

only 2nd and 3rd year residents. These sites will meet PC Underserved requirement in second year.

- **Location:** various opportunities
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/8/2021

- **Psychiatry for the General Internist**

- **Director:** Dr. Elizabeth Lowdermilk (Elizabeth.Lowdermilk@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Priority to PC.
- **Description:** There are 3 sites that will be available for the psychiatry rotations – Denver Health, Mental Health Center of Denver, and VA. Residents can specify which site(s) they would prefer based on their offerings at each site, and we will make every attempt to accommodate educational requests during these months. Please request your preferred sites from Erica Mendoza.
 - *Didactic- if the resident does not have their IM Wednesday Morning Session, he/she will attend the psychiatry didactics at 500 Bldg on Anschutz Campus.
 - Clinic experiences can include:
 - Denver Health (Dr. Liz Lowdermilk) Intake evaluations, treatment of mental health conditions in primary care, common psychiatric diagnoses such as anxiety and mood disorders, substance use disorders, women’s health clinics for pregnant females, and psychiatric emergency services. This is the main site for this rotation.
 - VA (Dr. Mitzi Wasserstein) The C-L setting lends itself to a large variety of psychiatric issues and illness severity, which correlates well with the pathology that Internal Medicine residents will likely see in their future practice. In this setting, residents will get experience in diagnostic formulation, assessing for suicidality and violence, determining pharmacotherapy, and some basic principles of psychotherapy in patients with comorbid medical and mental health issues. Additionally, the C-L service conducts geriatric psychiatry consults for inpatient med/surg at the VAMC, so IM residents will be able to evaluate, assess and develop treatment recommendations for geriatric patients as well as younger veterans. The residents work on an interdisciplinary team along with Psychiatry attendings and residents, MSIII and MSIV students, and, intermittently, Pharmacy residents, Neurology residents, and Nursing students. This provides a valuable opportunity for collaboration and mutual education. Time is regularly set aside for seminars with attending psychiatrists covering major topics in psychiatry. Some outpatient mental health experience may be available upon request.
 - Optional: Mental Health Center of Denver (Dr. Michelle Cleeves) Spend a day per week at the outpatient clinic at MSCD working with our PC residency graduates!
- **Location:** DH, VA
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/20/2021

- **Psychiatry Consult – Liaison**

- **Director:** Dr. Christopher Dobbelstein (Christopher.Dobbelstein@CUAnschutz.edu)
- **Coordinator:** Sara Dillard (Sara.Dillard@CUAnschutz.edu)

- **Description:** Residents will join the Consultation-Liaison Psychiatry (CLP) team at the University of Colorado Hospital. This team consists of psychiatrists, psychologists, nurse practitioners, social workers, and learners at various stages of their education. Patients are seen by various professionals on the team depending on the patient's needs (e.g., psychiatric medication management, hypnosis, cognitive behavioral therapy, supportive psychotherapy, etc.). Most patients are referred to the CLP service by their primary teams, but some are discovered proactively using an established screening procedure. This service operates Monday-Friday, 8:00 AM- 5:00 PM.
- **Location:** UCH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/25/2021

- **Pulmonary Consults Inpatient**

- **Director:** VA, Dr. James Lavelle (James.Lavelle@CUAnschutz.edu), UCH Dr. Jeffrey Sippel (Jeffrey.Sippel@CUAnschutz.edu)
- **Coordinator:** Marci Terrell (Marci.Terrell@CUAnschutz.edu)
- **Description:** These rotations are designed to allow internal medicine residents the opportunity to acquire and develop skills in diagnosing and managing inpatients with lung disease and critical illness requiring consultative care. If the resident desires, we can also make this a hybrid inpatient – outpatient rotation, on request. There are no admit or discharge duties. Additional knowledge and skills will be acquired by seeing patients under the guidance and supervision of pulmonary and critical care attendings and fellows. Specifically, residents will consult on patients with COPD, pleural disease, PE, ILD, hemoptysis, respiratory failure, PHTN, pulmonary nodules and masses, and infections. Bronchoscopies on patients on the inpatient services or outpatients are also performed. Other procedures (intubations, chest tubes, thoracentesis, pleural imaging) are performed as well. This is a 5 day work week, non-call schedule. Residents are encouraged to attend all conferences offered by Pulmonary Sciences & Critical Care Division (Pulmonary Grand Rounds: Thursdays, 7:30am Heitler Hall National Jewish Health, UCH ILD Case Conference Fridays 1-2:30pm AIP2 5.516-5.517 if at UCH). For specific rotation requests or for additional information, please contact Dr Maloney, above. Two sites are available:
 - - VA consult rotation: work with a 1st yr fellow, good mix of ICU and ward consults, bronchs, procedures, vent management, nodule clinic (Weds PM); there are 2 pulmonary fellows at VA and occasionally the 2nd year will cover the first year fellow and interact with the resident.
 - - UCH pulmonary consults rotation: work directly with a 2nd or 3rd year fellow: bronchs, CCU intubations and vent management, general consults; attending also covers separate stepdown service but resident/fellow do not; some residents will like the UCH environment, upper year fellow teaching and experience; also an opportunity to attend subspecialty clinics (PHTN, PE-CTEPH, ILD, asthma) as pace of the service allows.
- **Location:** UCH, VA
- **Ambulatory %:** 0-20%
- **Reviewed/Revised:** 3/12/2020

- **Pulmonary Hypertension**

- **Director:** Dr. Peter Hountras (Peter.Hountras@CUAnschutz.edu)
- **Coordinator:** Cheryl Loudd (Cheryl.Loudd@CUAnschutz.edu)
- **Restrictions:** 2-week long rotation

- **Description:** The University of Colorado Hospital Pulmonary Hypertension Center and Pulmonary Hypertension rotation is held at the Anschutz Inpatient Pavilion (AIP). It is primarily an inpatient rotation although outpatient experience if requested could be added. The inpatient rotation is attended by one of the Pulmonary Hypertension faculty members. This Pulmonary Hypertension (PH) rotation experience will provide the trainee with experience in the diagnosis and management of pulmonary vascular diseases, pulmonary embolism, and hereditary hemorrhagic telangiectasia.
 - **General:** The inpatient service for an internationally recognized, large, regional referral center for the care of patients with all forms of pulmonary hypertension. All time is spent on caring for inpatients with pulmonary hypertension at UCH.
 - **Schedule:** Inpatients are seen daily on the pulmonary hypertension service, seeing patients Monday-Friday. Daytime coverage is from 6am-6pm with sign out with/to the APPs in the MICU for coverage at night. This coverage is done in coordination with the Pulmonary Hypertension APP team and specific hour coverage will be discussed and divided up.
 - **Location:** Most inpatients are admitted to the 9th floor Pulmonary Unit of the Anschutz Inpatient Pavilion (AIP2) of UCH. Primary pulmonary hypertension patients are occasionally admitted to the 10th Floor MSPCU. Consults can be seen in any other parts of the hospital
 - **Staffing:** Inpatients are rounded on daily by the Pulmonary Hypertension Attending Physician on service, and by the fellow/resident team Monday-Friday (and one weekend day). In addition to pulmonary hypertension patients the pulmonary hypertension team is the first call from 6am-6pm for the Pulmonary Embolism Response Team (PERT). The fellow/resident or APP will be first response to see the patient and then along with pulmonary hypertension attending activate the Pulmonary Embolism Response Team and present the patient for multidisciplinary discussion.
 - **Patient Volume:** The Inpatient PH Service averages between 8-15 patients at most times.
- **Educational Goals for the Pulmonary Hypertension Rotation**
 - **Become familiar with the following aspects of the diagnosis and management of pulmonary arterial hypertension (PAH):**
 - Epidemiology
 - Screening
 - Diagnostic evaluation
 - History
 - Physical examination
 - 6-Minute Walk test
 - Echocardiography
 - Interpretation of the Right Heart Catheterization, including:
 - Shunt Series
 - Vasoreactivity Testing
 - Ventilation-Perfusion Lung Scan
 - Chest Radiography
 - Pulmonary Function Testing
 - Connective Tissue Disease Screen
 - Overnight Oximetry
 - Polysomnography
 - Assessment for possible liver disease
 - **Medical management, including:**
 - General Measures (anticoagulation, oxygen, exercise, etc.)
 - Calcium Channel Antagonists in appropriately selected Vasoreactive patients
 - Currently available PAH-specific medications
 - Endothelin Receptor Antagonists

- Phosphodiesterase Inhibitors
 - Prostanoids
 - Follow-up assessment
- Understand the appropriate triage of patients being admitted to the Pulmonary Hypertension Inpatient Service.
 - Participate in multidisciplinary discussion with PERT team and monthly CTEPH meetings.
 - Develop initial knowledge of the care of the pulmonary hypertension patient admitted to the Intensive Care Unit.
 - Understand end-of-life care for the patient with pulmonary hypertension.
 - Understand the peri-operative management of the patient with PAH.
- **Location:** UCH
- **Ambulatory %:** 0-10% depending on load of service
- **Reviewed/Revised:** 1/25/2021

- **Pulmonary Outpatient**

- **Director:** VA Dr. James Lavelle (James.Lavelle@CUAnschutz.edu), UCH Dr. Jeffrey Sippel (Jeffrey.Sippel@CUAnschutz.edu)
- **Coordinator:** Cheryl Loudd (Cheryl.Loudd@CUAnschutz.edu)
- **Description:** This outpatient elective is designed to provide IM residents with a broad experience in general pulmonary medicine, as well as, augment their experience with highly specialized areas of pulmonary medicine. Residents will be able to rotate among general Pulmonary Clinic, pulmonary hypertension, asthma, lung transplant, interventional Pulmonary Clinics. The clinics run Monday – Friday 8:00 AM to 5:00 PM. Residents will work predominantly with P/CCM faculty, as well as, P/CCM fellows. Case load of patients vary, but will typically review 1 new patient and 2-4 follow-up patients. Residents are encouraged to follow patients for procedures (i.e. bronchoscopy, whole lung lavage, etc.) Residents are encouraged to attend all conferences offered by DOM (Grand Rounds Wednesday noon) and Pulmonary Sciences & Critical Care Division (Pulmonary Grand Rounds: Thursdays, 7:30am Heitler Hall National Jewish Health, UCH ILD Case Conference Fridays 1-2:30pm AIP2 5.516-5.517). For specific rotation requests or for additional information, please contact Cheryl.Loudd@CUAnschutz.edu.
- **Location:** UCH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 2/7/2020

- **Rehab Medicine**

- **Director:** Dr. Elizabeth Knight (Elizabeth.Knight@va.gov)
- **Description:** Internal medicine residents will have the opportunity to hone their skills in musculoskeletal evaluation and clinic-based procedures, and gain exposure to electrodiagnostic medicine and interventional spine procedures. In addition, residents will participate in interdisciplinary clinics related to traumatic brain injury and amputee care. Not available in July, October or December.
- **Location:** RMR VA Medical Center
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/25/2021

- **Research – Primary Care**

- **Director:** Dr. Joseph Frank (Joseph.Frank@CUAnschutz.edu) and Jacinda Nicklas (Jacinda.Nicklas@CUAnschutz.edu)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Available to PC only.
- **Description:** The objective of participating in primary care research is to allow residents exposure to the process of conducting research while exploring issues that are relevant to them. As a secondary objective, we encourage presentation of research results at regional or national meetings as well as publication in a peer-reviewed journal. Suggested objectives for the initial research month include: 1) Conduct complete literature review, 2) Develop research protocol study plan, 3) Confirm data sources, availability and reliability, 4) Develop study timeline. Objectives for subsequent research months are: 1) Conduct proposed study, 2) Data analysis (can include working with a statistical analyst) and interpretation, 3) Preparation of abstract/manuscript, 4) Preparation for abstract presentation at a meeting. Other objectives, including work on existing projects, will be reviewed on a case-by-case basis. Prior to beginning the research month, residents must identify a research mentor who will be able to work closely with them to achieve the above goals. Drs. Frank and Nicklas provide oversight to the research program and can assist in identifying research mentors, defining projects and obtaining research funding. They will also be available to provide study design and analytic advice. Once a research elective is scheduled, the resident must complete a short research elective application form that is signed by their mentor for review and approved by Dr. Frank or Dr. Nicklas at least 60 days prior to the rotation. This step is to ensure your research project is appropriate for a resident, including feasibility within the length of time available. We also want to ensure that any necessary regulatory requirements for the research are in place. It is always a good idea to also speak to other residents who have been involved in research about their experiences.
- **Location:** N/A
- **Ambulatory %:** NON-CLINICAL
- **Reviewed/Revised:** 1/8/2021

- **Research**

- **Director:** Dr. Sarah Davis (Sarah.Davis@CUAnschutz.edu)
- **Coordinator:** Mary Meadows (Mary.Meadows@CUAnschutz.edu)
- **Description:** Residents interested in academic careers and/or fellowship are encouraged to participate in research. Up to 3 months of research elective will be considered for residents per ABIM guidelines. Residents are encouraged to speak to more than one prospective mentor. You are welcome to participate in basic or clinical research.
 - We have identified “resident research liaisons”: faculty in each specialty who can direct residents to research mentors who have a track record of success; the list of these faculty is located at the bottom of this page:
<http://www.ucdenver.edu/academics/colleges/medicalschoo/department/medicine/intmed/imrp/RESOURCES/fellowship/Pages/Contacts-for-Research-Projects-by-Division.aspx>
 - We also annually survey the faculty for those who are interested in mentoring residents; this is indexed by division or research category, and online at this page:
<http://www.ucdenver.edu/academics/colleges/medicalschoo/department/medicine/Pages/Research-Projects-with-Residents-and-Students.aspx>
 - Residents are also welcome to talk with Dr. Graham, their APD, or others about choosing a mentor. Once a research elective is scheduled, the resident must complete a short research elective application form that is signed by their mentor for review and approval by Dr. Graham at least 60 days prior to the rotation. This elective form is available at this page:

<http://www.ucdenver.edu/academics/colleges/medicalschoo/department/medicine/intmed/imrp/FORMS/Pages/Research-Approval-Form.aspx>

- This approval process is to ensure your research project is appropriate for a resident with the length of time available and that all details, such as regulatory requirements for the research to be done, are in place. One should take an appropriate amount of time to thoroughly complete this form as inadequate proposals will be returned to the resident and mentor for revision. At the end of your elective – please prepare your scholarly work. All residents who complete a research elective are strongly encouraged to submit an abstract to a national conference and attend the conference and present their work as a poster or oral presentation. Funds are available to attend conferences to present your work; the form (pay attention to the details!) is here:

<http://www.ucdenver.edu/academics/colleges/medicalschoo/department/medicine/intmed/imrp/FORMS/Pages/default.aspx>

- It is hoped that you will also be able to publish your work in a peer reviewed journal. Other types of scholarly work can be a “progress report” for projects that are still ongoing, an IRB submission packet, clinical protocol, review article, or simply an “end of project report”. Sometimes the data is negative, but that is still worth summarizing! This submission will count as your annual Scholarly Activity and as evidence of satisfactory completion of your research elective. If you are doing more than one month of research in an academic year, it is ok to wait until the last research month is completed before turning this in. However, one submission per academic year that you are doing research is needed. You may also be asked to give a 10 minute presentation during Wednesday Educational Sessions on your research.

- **Location:** N/A
- **Ambulatory %:** NON-CLINICAL
- **Reviewed/Revised:** 1/23/2018

- **Rheumatology Outpatient**

- **Director:** Dr. Jennifer Stichman (Jennifer.Stichman@dhha.org)
- **Coordinator:** Becky Alberti-Powell (Becky.Alberti-Powell@CUAnschutz.edu)
- **Description:** During the elective rotation in Rheumatology, residents will attend 6 half-dayclinics at University of Colorado Hospital (Anschutz Outpatient Pavilion), the Denver VAMC, and Denver Health. Residents will work in clinic alongside medical students and rheumatology fellows. They will see outpatients with a variety of rheumatic and autoimmune disorders including regional rheumatic disorders, crystal diseases, spondyloarthropathies, rheumatoid arthritis, osteoarthritis, lupus, Sjögren’s, myositis, vasculitis, and others. If

a resident has interest, there are opportunities to spend time in spondyloarthropathy clinic if arranged in advance. Dermatology and ophthalmology prelims may have an option to spend session in rheum-derm or rheum-eye combined clinics respectively. Residents will attend the weekly Tuesday morning Rheumatology Division grand rounds and teaching conferences. There is no night or weekend call.

- **Location:** UCH, VA, DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/15/2020

- **Rheumatology Acute Care Rotation**

- **Director:** Dr. Jennifer Stichman (Jennifer.Stichman@DHHA.org)
- **Coordinator:** Becky Alberti-Powell (Becky.Alberti-Powell@CUAnschutz.edu)
- **Description:** Rheumatology encompasses a wide range of autoimmune and inflammatory diseases. The majority of rheumatology clinical practice is performed in the outpatient setting; however, many interesting and acutely ill patients with rheumatic diseases are seen on the inpatient service, and as emergent outpatient evaluations. These diseases include severe lupus, vasculitis, or complications of immunosuppressive therapy such as infection that, because of the relative rarity of these conditions, a resident may not otherwise encounter during their training. In addition, inpatients and emergent outpatients are often patients that require joint aspiration for diseases such as crystalline arthropathy.
 - **EDUCATIONAL GOALS:** The resident will learn the appropriate evaluation and management approaches for patients with rheumatic diseases with a special focus on those patients that are acutely ill. This can include evaluations for vasculitis or lupus that include biomarker testing, imaging and tissue biopsy, and management strategies for patients with acute rheumatologic illness including but not limited to high-dose corticosteroid therapy, plasmapheresis and other forms of immunomodulation, as well as perioperative management of patients with rheumatic disease. In addition, the resident will learn the rationale, techniques and appropriate testing (e.g. synovial analyses) related to joint aspiration. This education will be applicable to residents interested in rheumatology as a career, as well as residents who may choose to do hospitalist medicine where familiarity with inpatient management of rheumatic diseases and joint aspiration will be of benefit.
 - **SCOPE OF WORK AND TIME COMMITMENT:** For this rotation, the resident will work at the UCHealth Anschutz Campus, and serve as the primary rheumatology consultant for patients assigned to them. They will work with the rheumatology fellow to identify patients that the resident will evaluate on either an outpatient or inpatient basis. The resident will then perform the initial evaluation and discuss the diagnostic and management plan with the rheumatology fellow and attending, follow the patient(s) as appropriate, and perform appropriate medical documentation. It is estimated that the resident will spend ~60% of their time performing urgent outpatient evaluations (clinic or emergency room), and 30% with inpatient evaluations. In addition, they will have approximately ½ day a week of rheumatology education at TUESDAY AM conferences. Based on the current monthly average of inpatient and emergent outpatient rheumatology consults, outside of the scheduled clinics, it is estimated that the resident will evaluate approximately 20 patients monthly (10 inpatient and 10 emergent outpatient), and perform approximately 4 joint aspirations/injections. The resident's duty hours will be approximately 730 AM to 530 PM Monday through Friday. They will NOT perform overnight or weekend call. Of note, this rotation is separate from the rheumatology outpatient elective rotation.
- **Location:** UCH
- **Ambulatory %:** 70
- **Reviewed/Revised:** 2/14/2020

- **Systems Based Practice**

- **Director:** Dr. David Elwell (David.Elwell@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Offered once a year in spring. Priority to PC.
- **Description:** Residents learn about the health care system, participate in high level medical decision meetings, and meet many of the people around town who make policy decisions. Designed to give residents a glimpse “behind the curtain” of how the health systems around us

are driven, financed, operated, and managed. We would encourage people to do the elective if you think you are going to like the topics (understanding healthcare systems, what's Medicare/Medicaid, who pays, how do you define "quality", how are coverage decisions made and who is making them?) This elective is more didactic-heavy and relies on the ability to gather residents in group on the same days to meet faculty and providers. In order to maximize the experience, a week vacation may be pre-determined.

- **Location:** DH
- **Ambulatory %:** NON-CLINICAL
- **Reviewed/Revised:** 1/20/2021

- **Transitions of Care**

- **Director:** Dr. Chi Zheng (Chi.Zheng@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Description:** Transitions of care are vulnerable times for our patients due to changes in location of care as well as the corresponding care providers. This elective is designed for residents interested in careers in general internal medicine, hospital medicine, primary care, geriatrics as well as subspecialties that have a large inpatient practice such as cardiology, pulmonology, oncology, GI and nephrology. This elective provides a mixture of clinical and didactic learning. The focus will be on the care for medically complex "superutilizers" in the Intensive Outpatient Clinic (IOC) and on patients being discharged from Denver Health with subsequent follow-up in the Hospital Transitions Clinic (HTC) designed to prevent readmissions and reduce preventable admissions. There will be options to tailor additional experiences to the residents' interests to include palliative care, Stout Street clinic/coalition for the homeless, Healthy Hearts Clinic, Innovage/Program for All Inclusive care for the Elderly. This past year, we have also introduced a component to include the Virtual Home Hospital for care for COVID-19 patients. Given this rotation is based at Denver Health, there will also be an education component that focuses on transitions of care for the underserved. The didactic components will include topics such as readmission risk assessment, interventions and bundles aimed at reducing readmissions, disease states that have been targeted, optimal communication around discharge, how to improve hospital primary care relationship and physician satisfaction, as well as optimal opioid prescribing during the transitions period. Residents interested in procedures will also have the opportunity to perform procedures in the HTC and IOC. Residents will have ample time for self-directed learning as well as opportunities for career mentorship in general internal medicine. There is no weekend or evening call on this rotation.
- **Location:** DH
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/25/2021

UCH Neuro

- **Director:** Dr. Jennifer Simpson (Jennifer.Simpson@CUAnschutz.edu)
- **Coordinator:** Jennings, Katelynn (KATELYNN.JENNINGS@CUANSCHUTZ.EDU)
- **Restrictions:** Required for R3 Categorical residents (2 weeks, paired with 2 weeks of UCH Consults IP) and R2 Hospitalist residents (2 weeks, paired with 2 weeks of UCH Consults Amb).
- **Description:** This 2-week rotation includes neurology experiences on the inpatient neurology services at the University of Colorado Hospital. Hospitalist residents will focus on the neurology consult service, which includes stroke alerts, other acute neurological emergencies, and routine neurological consults. Non-HTP residents may have an experience on either the stroke or general neurology services. The stroke service has the opportunity for stroke alerts as a learning experience. This rotation emphasizes the neurologic exam, differential diagnosis, interpretation of neuroimaging, and therapeutic approach. With advance notice, specific neurology

subspecialty experiences can be arranged. Residents are invited to attend neurology resident didactic sessions and stroke didactics and stroke case conferences.

- **Location:** UCH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/6/2021

- **UCH Consults**

- **Director:** Dr. Mary Wallace (Mary.Wallace@CUAnschutz.edu)
- **Description:** This rotation is designed to meet the needs of future hospitalists or inpatient subspecialists but covers many core principles of any internal medicine practice. Hospitalist and other hospital-based internists spend nearly 30% of their clinical care contact providing consultation and co-management in coordination with other non-medicine services. Residents will divide their time between (1) general medicine consultation and (2) co-management of orthopedic patients. This clinical experience emphasizes excellence in communication skills, the art of consultation, pre-operative evaluations, and post-operative medical management. A separate PGY2 and PGY3 formal curriculum is utilized in didactic sessions. PGY2 hospitalist residents will pair a 2-week UCH Consults rotation with the 2-week UCH Neuro rotation during a non-ward block. PGY3 categorical residents will also typically pair a 2-week UCH Consults rotation with the 2-week UCH Neuro rotation, but during a ward block. PGY3 hospitalist residents will complete a 2- or 4-week UCH Consults rotation during a ward block. This rotation is generally Monday-Friday with weekends off during non-ward blocks and 6 days per week on ward blocks. Vacation may be taken during 4-week but not 2-week rotations.
- **Location:** UCH
- **Ambulatory %:** 0
- **Reviewed/Revised:** 1/20/2021

- **Understanding Health Systems**

- **Director:** Dr. Emily Gottenborg (Emily.Gottenborg@CUAnschutz.edu)
- **Restrictions:** For HTP residents only; to be partnered with 2-week POCUS elective
- **Description:** It is of increasing importance for a hospitalist provider to understand the inner-workings of the health care system, including day-to-day hospital processes and procedures (laboratory, pharmacy, imaging), the leadership structures and functions (nursing, physician, C-suite, SOM and health system), and the impact of insurance markets and payor mix to care delivery. In this 1 or 2 week elective (depending on vacation time used), residents will gain exposure to each of these aspects of the healthcare system: they will observe the ancillary services of the hospital in action and utilize process improvement tools to better understand them, observe leadership in action by shadowing SOM and health system leaders, and meet with local policy leaders to understand the insurance markets in Colorado.
- **Location:** UCH
- **Ambulatory %:** 0 (Non-Clinical)
- **Reviewed/Revised:** 3/12/2020

- **Women's Health/Neurology**

- **Directors:** Dr. Michelle Cleaves (Michelle.Cleaves@dhha.org)
- **Coordinator:** Erica Mendoza (Erica.Mendoza@dhha.org)
- **Restrictions:** Available to PC only.
- **Description:** This provides residents exposure to several diverse outpatient clinical experiences including gestational diabetes, metabolic bone disease, breast and thyroid clinics, high risk OB,

and pelvic pain clinics. Residents will gain exposure in the diagnosis and treatment of sexually transmitted infections, performance of well-woman examinations, contraception, treatment and management of abnormal pap smears, workup of abnormal and dysfunctional uterine bleeding, diagnosis and work-up of incontinence, including urodynamics, and hormone therapy counseling.

- **Location:** Denver Health
- **Ambulatory %:** 100
- **Reviewed/Revised:** 1/16/2020

International Rotations

• Guatemala

- **Director:** Dr. Edwin Asturias (Edwin.Asturias@CUAnschutz.edu)
- **Coordinator:** Cristina Del Hoyo (Cristina.DelHoyo@CUAnschutz.edu)
- **Restrictions:** Must submit application and be approved.
- **Description:** for up to 12 residents per year (one per 4 week block), conversational Spanish required, although options for language classes are available. This program includes room and board. Travel Funds can be used toward flights/transportation.
 - The Guatemala (Trifinio) Global Health Elective is at the Southwest Trifinio outpatient clinic site located 45 minutes south from the town of Coatepeque, Quetzaltenango, Guatemala. The area is located in the coastal lowlands, home to approximately 23,000 people from 20 different communities. The Center for Global Health and the Jose Fernando Bolaños Foundation have developed a clinic and community programs in the area. The clinic serves a population of banana plantation workers and mostly their families (maternal health and pediatrics). Rotators will also include pediatric and family medicine residents. For more details see <http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/globalhealth/education/Pages/Global-Health-Elective.aspx>
 - There is a GME requirement that residents give a presentation upon returning from an international rotation. Upon return, residents are to arrange with the Chief Residents to present during a resident conference at UCH, DH or PSL. Please advise Nicole Goodwin and Dr. Geoff Connors of scheduled presentation dates.
 - Application can be found here: <http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/globalhealth/education/Documents/Guatemala%20GHA%20Elective%20Application%20Form.pdf>
- **Location:** Guatemala
- **Ambulatory %:** 100
- **Reviewed/Revised:** 3/19/2019

• Nepal

- **Director:** Dr. Ali Musani (Ali.Musani@CUAnschutz.edu)
- **Restrictions:** Must submit application at below website and be approved.
- **Description:** Consult <http://www.ucdenver.edu/academics/colleges/medicalschoo/departments/medicine/CommunityService/GlobalHealth/Pages/Nepal.aspx> or email Dr. Ali Musani for more information.
- **Location:** Nepal
- **Ambulatory %:** 100

- **Zimbabwe**

- **Director:** Dr. Suzanne Brandenburg (Suzanne.Brandenburg@CUAnschutz.edu)
- **Restrictions:** Must submit application and be approved.
- **Description:** Colorado-Zimbabwe International Exchange (CoZIE) program in Harare, Zimbabwe: for 2 to 4 residents per academic year interested in a resource poor mostly inpatient clinical experience with a commitment to teaching medical students and other learners. This program includes airfare and housing (additional positions may be available that include housing only).
 - CoZIE is a bilateral exchange program between the Department of Medicine in the University of Colorado School of Medicine (DOM UCSOM) and the Department of Internal Medicine in the University of Zimbabwe College of Health Sciences (UZCHS). UZCHS is a medical school in an urban resource poor setting. Residents who participate in this elective will work in teams with UZCHS faculty, residents and medical students. The objectives of CoZIE are:
 - Provide meaningful exposure to healthcare provision in resource diverse academic settings.
 - Model modern methods of clinical teaching.
 - There is a GME requirement that residents give a presentation upon returning from an international rotation. Upon return, residents are to arrange with the Chief Residents to present during a resident conference at UCH, DH or PSL. Please advise Nicole Goodwin and Geoff Connors of scheduled presentation dates.
- **Location:** Zimbabwe
- **Ambulatory:** 100
- **Reviewed/Revised:** 1/14/2019