

Child Neurology Elective Rotation

During this month, the student will see a variety of neurologic problems, including:

- epilepsy
- headache
- Neuromuscular disorders (e.g. muscular dystrophy)
- Cerebral palsy/spasticity
- movement disorders (e.g. tics)
- neurogenetic/metabolic disorders

The student will spend time in the child neurology clinics at Doernbecher Children's Hospital and Shriners Outpatient Center, as well as with the inpatient consult service at Doernbecher. Additional time may be spent on interpretation of EEG and neuroimaging studies.

Objectives/Requirements

- 1) Become facile at the pediatric neurological examination
 - a. All notes should contain a breakdown of the 7 key components of the neurologic examination so that this becomes automatic
 - b. Presentations may focus on pertinent positives/negatives
- 2) Be comfortable with concept of anatomic localization of neurologic deficits
- 3) Awareness of normal developmental milestones
- 4) **4 week elective:** Complete project (discuss possible topics/methods with Dr. Coryell during 2nd week of rotation; possible projects include PowerPoint presentation, student/resident teaching material, parent teaching materials, etc).
- 5) **2 week elective:** present a topic relevant to patient care (5 minutes) on in-patient rounds
- 6) Follow hospitalized patients primarily (as "sub-intern"); write daily notes, discharge summaries, outpatient notes, present to attending; to be supervised/co-signed by resident or fellow. Completion of EPIC notes for inpatients as explained by attending/fellow.
- 7) Evaluate outpatients in general neurology clinic. Complete notes within 24 hours. Check with individual attending to clarify whether note should be completed in EPIC or emailed as Word document. Experiences in sub-specialty clinics will largely be observational.
- 8) Have neurologic exam observed by attending
- 9) Read core articles

Contact Information

1. Make sure you have received a copy of your weekly schedule from **Andie Elliott** (503-494-9113; CDRC Room 1247), who is the program administrator.
2. For questions on where to find the neurology team, contact lead resident or fellow through SmartWeb (Neurology-peds neurology>FELO)
3. **Jason Coryell, MD** (pager 12068, CDRC Room 1241) serves as preceptor, and will provide guidance with general orientation, selection of clinics, choice of project, and general curriculum issues.

Schedule

Below is a rough schedule. Students will receive a schedule each Friday via email with specific clinics for the upcoming week. Please email Andie Elliott and Dr. Coryell with schedule conflicts in advance. For unanticipated illness, please notify both Andie Elliott and the resident/fellow for the team.

In general, the daily work flow includes:

- 1) Pre-round on patients before am conference (discuss any immediate concerns with resident/fellow)

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- 2) Morning conference (Grand rounds or morning report)
- 3) Neurology clinic at DCH between 9-12 (sometimes, there are no clinics on Tues)
- 4) In-patient rounds at 1:30 (10 North workroom across from nurse's station)

By necessity, the schedule remains flexible. The resident/fellow may ask you to do an in-patient consultation during one of the clinic times.

There are a number of specialty clinics, which are also excellent learning opportunities:

- 1) **Shriner's muscular dystrophy clinic (Shriner's Hosp, 1st floor, start time 8 am on 1st, 4th, and 5th Fri of month; 2nd Tues of month)**
- 2) Down syndrome clinic (CDRC clinic, 7th flr DCH, Fridays with JP)
- 3) Spina bifida clinic (CDRC clinic, 7th flr DCH, Wednesdays with JP)
- 4) Brain malformations clinic (CDRC clinic, 7th flr DCH, 3rd Thurs, with JP)
- 5) Tone clinic (Shriner's Hosp., 1st floor, Wed with EF/BR)
- 6) Botox clinic (Shriner's Hosp, 1st floor, Th with EF)
- 7) Neuro-genetics/metabolics clinic (CDRC clinic, 7th floor, 2nd or 3rd Tues of month, with EF/JC)
- 8) Neuro-oncology clinic (DCH 10 South, Wed afternoon, with JC)
- 9) EMG clinic (CHH waterfront, Tues afternoon, with EF)

If a clinic is unexpectedly cancelled or if there is nothing on the schedule, the default plan is to meet up with the general neurology team in general neurology clinic (am) or in-patient rounds (pm). If you know in advance that you will a scheduled clinic or rounds, please notify the lead resident/fellow ahead of time.

2. Special conferences include:

Pediatric Morning Report—daily 8:30 am; neurology patients may be presented. In CDRC 3200

Pediatric Grand Rounds—each Thursday at 8 am, 11th floor of DCH

Neurology Grand Rounds—each Wednesday at 800 am (September through June) 8th floor auditorium, main hospital, near Emergency Department

Pediatric Neuroscience Seminar—each Wed 4:00 pm CDRC 3220

Pediatric Neuroradiology Conference—every other Wednesday at noon DCH 10th floor conference room

References during rotation

1. Articles forwarded by Andie Elliott
2. Books
 - a. Fenichel, Gerald. Clinical pediatric neurology A signs and symptoms approach.
 - b. Swaiman, Kenneth. Pediatric neurology Principles and practice.
 - c. Zitelli, Basia. Atlas of Pediatric Diagnosis (Neurology Chapter).
3. www.genereviews.org (genetic testing and reviews related to specific disorders)
4. <http://www.ncbi.nlm.nih.gov/sites/entrez?db=OMIM> (genetic reviews based on signs/symptoms)
5. <http://www.neuro.wustl.edu/neuromuscular/> (all-knowing on neuromuscular disorders)
6. <http://www.med.uc.edu/neurorad/webpage/files.html> (neuroradiology->congenital cases)

STAFF:

Thomas K. Koch, M.D. (Chief)

Stephen A. Back, M.D., PhD.

Jason Coryell, M.D. (rotation director)

Erika Finanger, M.D.

Michael Narus, D.O.- primarily in Medford, OR

Colin Roberts, M.D.

Barry S. Russman, M.D.- primarily at Shriner's

Jenny Wilson, M.D.

Carter Wray, M.D.