2016 Program Coordinator Retreat: Academic Affairs-NMHC
March 4, 2016

Jim Dersnah, Director
Allison Kane, GME Program Manager
Mia Collins, Observer and Elective Coordinator

***Best if opened in .PPT format***
Agenda

Jim Dersnah, Director, Academic Affairs

- Observer and Elective Criteria and Instructions
- 2016 Orientation Schedules
- What’s New?
- NMI and the Program Coordinator: Useful Tips
Observers and Electives
Presented by Mia Collins
Criteria for Elective Rotations & Observers at NMH and NMG

• 18 years of age (no high school students)
• Must be a pre-med student or in the medical field (resident, fellow, attending, etc)
• Observation is only for 5 days (can be extended for 2 weeks with chairman approval)
• Must have prior approval from department wishing to observe
• No international medical students
• Medical records must be in English
Step by Step Process for Observers

1. Visitor will contact the department they wish to observe
2. Coordinator sends the observer application to visitor
3. Coordinator collects the completed application along with the corresponding documents listed on the application checklist
4. Coordinator to obtain the signatures from:
   a. NMH - Chairman of department or Division Chief and Host Attending
   b. NMG – Department Administrator or Clinical Practice Manager and Host Attending or Clinic Employee

**Note:** If visitor would like to observe in the OR Wendy Willson’s signature will need to be obtained by sending the complete packet to Gina Lenzie in Surgical Services

5. The complete packet with signatures can be emailed to Mia Collins at mccollin@nm.org for final approval. You will receive an email of approval along with the signed ID badge form
   a. If the visit is only one day no ID badge is needed
Step by Step Process for Elective Rotation

1. Visitor from external institution contacts department for elective
2. Coordinator sends visitor the elective rotation packet to complete
3. Coordinator contacts Academic Affairs to confirm whether an Institutional Agreement or Program Letter of Agreement (PLA) is in place
   a) If no agreement and the rotation is 30 days or more, please obtain the templates from Academic Affairs (on NMI) to complete and return to the contact at the external institution
   b) If visitor rotation is less than 30 days please use the Academic Affairs PLA template
4. Current State of Illinois medical license
   a) If applicant is not licensed in Illinois, he/she must contact the Illinois Department of Financial and Professional Regulations (IDFPR) to get an Illinois limited temporary medical license. Allow 10–12 weeks for processing
5. Coordinator collects the completed packet along with the corresponding documents listed on the checklist
6. Coordinator obtain signatures from Chairman of the department or Division Chief and host attending
7. The completed packet with signatures can be emailed to Mia Collins at mccollin@nm.org for final approval.
   a) Coordinator will receive email of approval along with signed ID badge form from Mia
   b) Mia will request all EMR access and provide login information
FAQs

• Is there a time limit on for observerships?
  – Yes, an observership has a time limit of 5 nonconsecutive days. If the observer would like to observe on nonconsecutive days, they will need to supply the exact dates they will be in the clinic. According to our policy, an extension of up to 2 weeks may be granted with the Department Chairperson’s approval.

• Do NMG observers need to have an official NM ID badge?
  – No. Not all NMG clinics are located on the downtown campus where the ID badge office is located. Due to this, NMG observers are waived from having to obtain an official badge. However, they are required to wear temporary badges and must be supervised at all times.

• Do you supply parking passes for observers?
  – No parking passes are available for observers

• Can a high school student observe in a clinic?
  – No. According to our policy, a high school student may not be an NM observer. In addition, an observer must be 18 years of age.

• If the flu shot is currently not available, may this be waived from my application?
  – During the summer months, the flu shot is not available for distribution. If you have not received the flu shot in the past 12 months and are unable to obtain it due to these specific circumstances, you may have your flu shot waived. However, this will be determined by the person who reviews your application.

• May a NMG observer observe in an Operating Room?
  – Yes, if they meet the requirement of being in a medical training program. Their application will need the signature of Wendy Willson in Surgical Services.
FAQs continued

• Who does an observer contact in regards to the location of the clinic, how to get there, and other logistical matters?
  – The observer should be in communication with the department Coordinator, Practice manager or the host attending to arrange all details of their observation.

• If an international observer applicant cannot obtain a certain vaccine in their home country, how should they proceed with their application?
  – The observer may obtain the vaccination once they arrive in the USA; however, their application will not be approved until all appropriate vaccination records have been submitted for review.

• May an applicant apply for both an observership at an NMG outpatient clinic and an NMH inpatient clinic?
  – Yes, please only submit one packet

• May a NMG or NMH observer be granted access to Electronic Medical Records (EMR), Power Chart or EPIC?
  – No. NMG or NMH observers will not be granted access to EMRs.

• May a current NM employee observe in the NM network?
  – Yes, they may. They will need to submit the observer application with the approval signature of the Chair and host attending and a signed confidentiality agreement.

• Why does the clinic and NM need paperwork for a student to observer in a clinic?
  – If a person were to observe in a clinic and they did not apply for an observership or seek approval through the appropriate channels, they are putting that clinic, clinician, nurse, and the organization at risk for multiple legal violations.

• Is there a dress code for observers?
  – Yes, observers must abide by the NM dress code policy. Yes, they are allowed to wear their own institutions lab coat along with an NM ID Badge
AY17 Orientation Schedules

June 23rd: Interns
July 1st: PGY2+ and Fellows
<table>
<thead>
<tr>
<th>Time</th>
<th>Monday June 20th</th>
<th>Tuesday June 21st</th>
<th>Wednesday June 22</th>
<th>Thursday June 23rd</th>
<th>Friday June 24th</th>
<th>Saturday June 25th</th>
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</thead>
<tbody>
<tr>
<td>7am</td>
<td>Corporate Health</td>
<td>Corporate Health</td>
<td>Corporate Health</td>
<td>PowerChart Session</td>
<td>Corporate Health</td>
<td>Welcome Reception</td>
</tr>
<tr>
<td></td>
<td>(IM, Prelim Med, MedDerm, Anesth, PMR)</td>
<td>(IM, Prelim Med, MedDerm, Anesth, PMR)</td>
<td>7am - 12pm</td>
<td>3:00-5:30pm</td>
<td>Ortho (5) Urology (4)</td>
<td>Ortho (5) Urology (4)</td>
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<tr>
<td></td>
<td>8am</td>
<td>9am</td>
<td>10am</td>
<td>10:30am</td>
<td>1:30-4:30pm</td>
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<tr>
<td></td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Orientation</td>
<td>Team Training</td>
<td>ACLS 1pm-7pm</td>
</tr>
<tr>
<td></td>
<td>12pm</td>
<td>12:30pm</td>
<td>1pm</td>
<td>Corporate Health</td>
<td>Feinberg BC</td>
<td>GenPract(2), OralMax(1), Oto(3), Thor(1), Uro(4), Vasc(1), NeuroSurgeon(4), Emergency Medicine(15), GenSurg(5), Plastics(2), PrelimSurg(7), Ortho(6), Path(6), OB(12)</td>
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<tr>
<td></td>
<td>Lunch</td>
<td></td>
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<td>OB (12)</td>
<td>1:30-4:30pm</td>
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<td>2pm</td>
<td>2:30pm</td>
<td>3pm</td>
<td>Corporate Health</td>
<td>Team Training</td>
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<tr>
<td></td>
<td>Room Turnover</td>
<td></td>
<td>3:30pm</td>
<td>Path (5) OralMax (1) Oto (3), Plastics (2), Thor (1), Uro (4), Vasc (1)</td>
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<td>4pm</td>
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<td>5pm</td>
<td>Corporate Health</td>
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<td></td>
<td>Welcome Reception</td>
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<td>5:30pm</td>
<td>EmeRMed (11)</td>
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<tr>
<td></td>
<td>Welcome Reception</td>
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<td>Welcome Reception</td>
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<td>6:30pm</td>
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</table>

*ACLs: IM (38), Prelims (8), MedDerm (1), Anesth (11), PMR (4) Total: 50
*541-996: Pathology (5) Total: 5 PowerChart*
*PowerChart Session 1: 12:00-2:30pm
541-9 (all classrooms): IM (38), Prelims (8); PMR (4) Total: 50
541-1764: Anesth (11), Psych (8); Med-Derm (1) Total: 20
*PowerChart Session 2: 3:00-5:30pm
541-996: Fam Med LFH/NAH (14) Total: 14
541-997: OB (12) Total: 12
541-997: Gen Surg (5), Prelim Surg (7), NeuroSurgeon (4), OralMax (1), Ortho (6), Oto (3), Plastics (2), Gen Prac (2) Total: 18
541-1764: Urology (4), Oto (3), Ortho (6), Plastics (2) Gen Prac (2) Oral Max (3) Total: 18
*Welcome Reception: 12-14
<table>
<thead>
<tr>
<th>Time</th>
<th>Friday July 1</th>
<th>PACS/RadNet</th>
<th>PowerChart</th>
<th>Corporate Health</th>
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<tbody>
<tr>
<td>7am</td>
<td>NMH Orientation 7:00 am to 9am (Feinberg A) Registration 8:30am</td>
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<td>8am</td>
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<td>9am</td>
<td>Break Out Groups (ID Badge, Pagers, Lab Coat, Benefits &amp; Payroll, Brunch)</td>
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<td>10am</td>
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<td>1:30pm</td>
<td>Room Turnover 2:30-3:00pm</td>
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Orientation Day Overview

- Interns: Tuesday, June 23, 2015
  - Check-in and Welcome
    - Professionalism
  - Presentations
  - Break-Out Groups
  - Lunch
  - Individual schedules
  - Intern Welcome Reception: 5:30 p.m. Krumlovsky Atrium with Dean Neilson and Northwestern Medicine Leadership
ACLS/BLS
It’s SO EASY!

  – Schedule of classes posted through December 2016
  – Self-enroll
  – Choose **yes** for “Is your school or employer be paying for course?”
• To arrange a class for your trainees (i.e. group renewal):
  – Wade cell phone: 847-334-8274 ➡ Cell phone!
    • Easiest way to reach Wade
  – Wade email: [emt.431@msn.com](mailto:emt.431@msn.com)
• Additional ACLS Renewal class added July 6, 2016 4-8pm
Corporate Health

  - *They cannot begin to treat patients until this has been completed*
- **Responsibility of the trainee**
  - *Corporate Health will not accept documents from the program coordinator*
- Submission of requirements **due May 20**
  - Drug Test orders will be sent to each individual *after* vaccination history is received and must be completed within **30 days of start**
- See Program Coordinator resource page for more information
What about our late or delayed starts?

PowerChart Training, Orientation, and Corporate Health

• We don’t know! 😞
• Corporate Health requirements still apply
• Thanks for your patience and stay tuned!
DMAIC provides an easily governed systematic process to deliver measurable results.

**Define**
- Who are the customers and what is the problem from their perspective?
- How is the process performing today and how is it measured?

**Measure**
- What are the most important drivers of poor performance?
- How do we remove the drivers of poor performance?

**Analyze**

**Improve**
- How do we ensure that we sustain the improved performance?

**Control**

*Slide from Process Improvement Leadership Training*
Resident and Fellow Data Improvement

Problem Statement: NMHC hosts 847 residents and fellow physicians (“GME” or “house staff”) as well as ~60 RIC in over 80 programs. However PeopleSoft, the central database for all POIs including GME, reflects inaccurate house staff records.

- Misrepresentation of data has resulted in 40% GME past-due TB/refits; internal gaps for appropriate EMR/IT approval structure; misdirected patient calls and outside healthcare companies; and significant non-value added time of manual effort between Academic Affairs, NMIT and HR. This is because **99% of house staff have incorrect contact information** listed in Purple Pages (fed from PeopleSoft).

- Unnecessary disconnect between PeopleSoft & MSOW for centralized physician information due to different unique identifiers causing too many steps to request and maintain proper access to NMIT applications (Cerner, Epic)

Goal/Benefit: House staff are often the first physicians involved in patient care. Ensuring house staff data integrity within all systems will promote better navigation of IT approval structures and account accuracy. While manual effort will be reduced significantly, correcting and streamlining institution-wide communication will allow house staff to focus not on lack of access or accessibility but the NM mission of patients first.

Scope: HR: MYHR, HRMS; NMIT; MSO; McGaw; NMH/LFH/RIC-based house staff

System Capabilities / Deliverables: Establish NPI as physician unique identifier to align MSOW and PeopleSoft; clearly define reporting lines for GME trainees and program directors (managers) within PeopleSoft; automate initial data entry

Resources Required: MYHR, HRMS and NMIT clinical application personnel expertise; access to PeopleSoft; MSOW

Key Metrics

**Outcome Metric(s):** 100% correct reporting manager; N% reduction in manual steps; 100% correct contact information

**Process Metric(s):**

### Milestones

<table>
<thead>
<tr>
<th>Description</th>
<th>Date (MM/YY)</th>
</tr>
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<tbody>
<tr>
<td>Define: identify team members and create timeline of desired achievements; understand definitions across departments</td>
<td>12/15/15-1/31/16</td>
</tr>
<tr>
<td>Measure: Current state of data in PeopleSoft; IT ticket times; # of manual steps to create accounts</td>
<td>2/1/16-3/15/16</td>
</tr>
<tr>
<td>Analyze NMG physician onboarding best practices; MYHR process; NMIT process</td>
<td>3/15/16-4/15/16</td>
</tr>
<tr>
<td>Improve</td>
<td>4/15/16-5/15/16</td>
</tr>
<tr>
<td>Control</td>
<td>5/15/16-7/1/16</td>
</tr>
</tbody>
</table>

Exec Sponsor: John Sullivan, MD

**Sponsor(s):** Jim Dersnah, Tracey Woods, Warren Cinnick

**Process Owner(s):** B. Downing, E. Burnett, C. Jayanti/MYHR Team, D. Mueller

**Improvement Leader:** Allison Kane

**Team Members:** A. Kane, B. Downing, C. Jayanti, A. Washington, C. Taylor, E. Zimmermann
Huh?

Define → Measure → Analyze → Improve → Control

Accuracy of House Staff Reporting Structure in PeopleSoft*

- Not Found in PeopleSoft: 6%
- Incorrect Manager/Program Director Listing: 43%
- Correct Manager/Program Director: 51%

*N=914 NAH: 23 RIC: 44 NMHC: 847

**Based on McGaw appointment report 2.1.16 and PeopleSoft Report of all NMHC employees and POIs 1.20.16
Dates of Communication to Incoming Trainees

3/24-4/15
- McGaw Data Entry
  - Match information received
  - Database entry
  - NU Email and NET ID assignment
  - Manual entry ➔ greater chance for errors; “homegrown” database

4/15-4/20
- Academic Affairs Data Preparation
  - Confirm appointments
  - ID former FSM students/employees
  - Assign cost center, job code, physician manager, LMS curricula
  - Manual download; missing appointments (peds, RIC, unmatched); manual spreadsheet

4/20-5/1
- MYHR PeopleSoft ID Assignment
  - ID required for EMR access
  - Cost center deems reporting structure
  - Preferred email should be NU email
  - LMS account creation

5/1-5/15
- MSOW Upload
  - PRIMES ID assignment interfaces to Cerner
  - Interfaces to Epic and triggers Epic account creation
  - Single source of truth for all physician information

5/1-5/15
- NMIT - EMR Account creation
  - Epic pools and scheduling
  - Cerner Apps: PACS, FirstNet, PowerChart; E-Prescribe; remote access
  - Usernames and classroom packets created

6/1-6/1
- Academic Affairs Data Share & Adds
  - Scrub pin; paging; dictation code; Corporate health; schedules
  - ID badge prep (CCURE)
  - Late additions or missed appointments
  - Multiple versions of spreadsheets to multiple people; PS interface to CCURE and Paging unclear

6/1-6/22
- LMS Compliance Tracking
  - Indiv. notifications
  - NMHC mandated training i.e. conflicts of interest, HIPAA, exposures
  - Automatic compliance reports thru email

6/1-6/30
- Terminations and Transfers
  - MSO, Programs & McGaw surveyed for transfers
  - Terms pulled from McGaw database
  - Data prep to NMIT and HR via spreadsheet

Cost center transfer will go thru but not job code; terms too early; do not know attdg transfer info i.e. NMG CC

How is app access determined; duplicate accounts created; are NMI and EMR logins the same

Wrong cost center ➔ incomplete compliance reports; manual tracking thru admin; incorrect email in LMS

$ to migrate to MSOW; license and NPI information incomplete; does not interface with PeopleSoft
Ch-ch-ch-ch-ch-ch-ch-CHANGES

HR ENTRY
- Process becoming automated
- Fixing resident email/contact listing
- At least 6 other projects happening simultaneously

NMIT
- New players on the court
- Decisions on application needs and timeline yet to be established

MSOW (Medical Staff Office Warehouse)
- Must have NPI number to enter
- Triggers creation of Epic and Cerner accounts
- Centralized physician database

Taleo/My Learning
- New e-learning system
- Capabilities TBD
- Revisions to modules
- Additions
NMI and the Program Coordinator: Useful Tips and Tools
How We Support You and Your House Staff

How YOU Can Help Support Your House Staff!

- **Monthly Chief Resident Forum**
  - Coordinators on copied on the minutes—read to stay up-to-date!

- Close contact with MRFF leaders

- Access Approval
  - EMR; ID Badge swipe access

- Hospital Based Services and Resources
  - EVS; IT; Repairs

- NMHC Hospital Policy and Practices Compliance
  - Study up!

- Miscellaneous
  - Scrub pins, parking, replace missing or destroyed lab coats, locker assignments, etc.

Hmm there’s this fancy homepage called NMI. What’s there?
A quick guided tour: 6-HELP NOW

- Default to Feinberg (will auto-populate)
- n/a or start describing problem
- State the problem
- Include my email address for approval akane2@nm.org if for resident EMR/IT issue
- Click Submit!
NMI

A quick guided tour: SENTACT

- Environmental Services (Housekeeping) Requests
- Keys
- Light bulbs
- Room temperature
- Whatever you need!
NMI’s Department of Academic Affairs-GME

Northwestern Medicine’s Department of Academic Affairs facilitates and provides administrative oversight for education across the health system and acts as the educational liaison with McGaw. We maintain close relationships with program directors, program coordinators, and system leadership to continue enhancing your experience while training at NMI.

Academic Affairs communicates with you as an NMI-based house staff member frequently via e-mail so you’re up-to-date on all hospital and system based campus emergency and regulatory notifications, policy updates, events, and changes. We also support your infrastructure access from IT to badges to unit work and on-call rooms.

It is our responsibility to ensure you have all of the educational resources at your fingertips. Our FAQs, Helpful Links and Resources and IT inquiries pages are aimed to answer questions before you have them. Something here you’d like to see? Contact Allison Kane (information below). Welcome!

Who We Are
James Dersnah, Director
jdersnah@nm.org
312.926.3262

Allison Kane, GME Program Manager
akane2@nm.org
312.926.7430

Contact
Additional Resources

- Campus Information
- Policies
- Directory
  - Parking
  - Finance
  - IT Security guidelines
- NM Brand Center
- MD On-Call schedule
- Web Paging
- NETS
What’s New?
Northwestern Medicine Integration Update

• Northwestern Medicine is now comprised of:
  – Northwestern Memorial Hospital
  – Northwestern Medical Group
  – Northwestern Lake Forest Hospital (Lake Forest, IL)
  – Grayslake and Glenview Outpatient Centers
  – Central DuPage Hospital (Winfield, IL)
  – Delnor Hospital (Geneva, IL)
  – Kishwaukee Health System
  – Marianjoy Rehabilitation Center

• Family Medicine Program developing in West Region
• Minimal GME presence in other regions
• More acquisitions are likely
House Staff Lounge and Workspace Refurbishment

- All call and work room computers within Feinberg, Galter & Prentice are outfitted with Thin Client, also known as “Tap ‘n’ Go

- New outlets installed that will charge your smart phone (6th Floor only)
More New Toys
Galter 11

Workout equipment; new locker assignments; small lounge

• Use date is TBD; still progress to be made
New Call Room Assignments Effective May 1, 2016

- **New Assignments:**
  - Feinberg 4-710H: Napping Room
  - Feinberg 6-502G: Napping Room
  - Feinberg 6-502K: Plastic Surgery
  - Feinberg 6-502L: Urology
  - Feinberg 14-536B: Orthopedic Surgery
  - Feinberg 6-502 R,Q: All surgical specialties
Napping Rooms
What’s a napping room?

• NMH’s Napping Rooms are provided for:
  – All house staff within all programs
  – Strategic napping and rest when feeling overly fatigued
  – Promoting a safe, healthy learning and working environment
New Call Room Guidelines

• NMH’s On-Call rooms are provided for:
  – In-house overnight call
  – Safe, private sleeping space between or during overnight shifts
  – On-call from home and may require a room/cannot return home before next shift to rest appropriately
  – A clean, quiet workspace during the daytime shifts (respective to your program’s assigned rooms) on a first-come, first-serve basis.

• What are they NOT for?
Call Room Guidelines Effective 5/1/2016

- On-call rooms are not to be designated to a single individual or used for personal office space or personal storage.
  - (Supplemental storage will be added to the locker rooms to accommodate extra items such as clothes and shoes.)

- Biohazard materials, sharps, saline bags, bandages and vials of any kind of sedative, anesthetic or injectable drugs are absolutely prohibited from being left behind in a call room.
  - All medical supplies brought into a call room while on shift must be removed and taken back to the appropriate work space i.e. unit, unit work room, OR, lab, etc.

- All personal items from use of the call room the night before must be cleared by 9am to allow for cleaning.
  - EVS will not make the bed if items are left on it.

- Extra blankets, pillows, and other reasonable items of comfort are acceptable as long as they are agreeable amongst your program. These may be stored in west corner shelving units.
Call Room Cleaning Schedule For 6th Floor

<table>
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<th>Weekdays</th>
<th>Room</th>
<th>Time</th>
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<tr>
<td></td>
<td>6-502 C-H</td>
<td>10am-12:30pm</td>
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<tr>
<td></td>
<td>6-502 K-R</td>
<td>1:20pm-2:30pm</td>
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<th>Weekends</th>
<th>Room</th>
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<td></td>
<td>6-502 ALL</td>
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<tr>
<td>Program</td>
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<tr>
<td>Emergency Medicine</td>
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<td>NAPPING ROOM</td>
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<tr>
<td>Ophthalmology</td>
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New NMI House Staff Website!

http://nmi.nmh.org/wcs/page/nmh-housestaff

• Up to date information on:
  – Grand Rounds
  – Joint Commission
  – Medicare Part D FAQs
  – General FAQs and links to both NU and NMH resources
  – We *can* get NUFSM employees access
Social Media Campaign
Twitter, Facebook, and Instagram

• Twitter
  • Follow @NM_365: A Year in the Life of a Resident
    – Increase Engagement; strengthen our brand; community; sharing and celebrating accomplishments; potential for alumni engagement; advertising to potential constituents

• NM Academic Affairs is on FACEBOOK!
  – www.facebook.com/nmacademicaffairs
    – Engage new and current house staff
    – Post relevant updates
    – Connect with peer academic institutions
    – Widen audience

• Instagram: @NM_365
Thank You