

## CORE SUB INTERN SELECTIVE SIMULATIONS

All UA College of Medicine–Phoenix students on their required sub internship rotation (family medicine, internal medicine, OB/GYN, pediatrics, psychiatry, surgery) participate in an afternoon of simulation.

Students are required to complete preparatory reading and worksheets prior to the simulation which count for 25-50% of the simulation score. The remainder of the simulation score comes from simulation performance. Students do two simulations per topic. The second simulation is a different diagnosis or a more complicated presentation of the initial etiology. The focus of the simulation is EPA 10: recognize a patient requiring urgent or emergent care and initiate evaluation and management. Students are given feedback after each simulation

### **Adult curriculum**

- Hypertension (first sim: asymptomatic hypertension/hypertensive urgency, second sim: hypertensive emergency)
- Perioperative fever (first sim: biliary leak, second sim: alcohol withdrawal)
- Perioperative hypoxia (first sim: atelectasis, second sim: shock)

### **Pediatric curriculum** (For students on pediatrics and family medicine)

- Fever
- Hypoxia
- Fluid and electrolyte management

## INTERNAL MEDICINE SUB INTERNSHIP SIMULATION

All students completing their required sub internship in internal medicine at Banner – University Medical Center Phoenix and Valleywise Health Medical Center (formerly Maricopa Medical Center) participate in two afternoons of simulation.

Students are required to complete preparatory reading and an at-home quiz prior to the start of the simulation. The quiz is self-graded by the students and used by the faculty supervisor to discuss important teaching points on the simulation. Students do the simulation twice; the first simulation will be on the assigned topic. The second will be related to the chief complaint during the first simulation. Students are given feedback after each simulation.

### **Curriculum**

- COPD exacerbation (second sim: PE)
- UGI Bleed (first sim: bleeding ulcer, second sim: variceal bleed)
- ACS (first sim: STEMI, second sim: NSTEMI with acute heart failure)
- Sepsis (first sim: paraplegic with suprapubic catheter recent UTI with infected decubitus, second sim: lung transplant patient admitted with PE with worsening tachycardia)

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