

# MED-PEDS NEWS

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## NOTICES

- **The Med-Peds evidence based ambulatory syllabus is here.**
- **Books Program started at MLK.**

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## From the Director

### RECRUITMENT

I want to personally thank everybody involved in this year's resident recruitment process. We did some things different this year and the feedback overall was positive. I particularly want to give a big thanks to Cindy Alegria for the countless hours she spent organizing the applicants' days and for her special touch that always made the applicants feel welcomed. We are already thinking about next year and welcome your suggestions. One of our biggest changes for next year will be scheduling a Med-Peds dinner on the second evening that the applicants are here. ■

### MATCH

The pool of applicants for Med-Peds this year is again outstanding. The match will be held on March 21. A list of our new interns will be posted on our Web site that afternoon. ■

### AMBULATORY SYLLABUS

Our long awaited ambulatory syllabus is complete. You should be receiving your copy shortly. This ended up being a much bigger project than I imagined. Modeled after Yale's Primary Care Internal Medicine Ambulatory Syllabus. Our Med-Peds faculty have selected and reviewed recent and important, evidence based articles in ambulatory internal medicine and ambulatory pediatrics. Each article has an accompanying list of objectives and a case. Our intent is to review the article in the context of the case and the case questions. The first 30 minutes of each continuity clinic session will be devoted to this. Just yet another reason to show up to clinic on time. ■

### RETREAT

The retreat has been scheduled for April 5, 2002. More details to follow. ■

## Recruitment

*By Cindy Alegria*

Another recruitment season has come and is almost gone. It has been an experience like no other, both demanding and rewarding. This year a total of 55 applicants were interviewed.

Applicants from across the U.S. were seen. They were from places like New York, California, Florida, as well as from our very own city. These many outstanding and excellent candidates would like to make Baylor the place to realize their dreams. Hearing about their interview experiences, the important choices they made regarding their careers, what brought them to Baylor and how Baylor fits into their plans, made for many interesting conversations.

The goal was to make the applicant's experience at Baylor a pleasant one by providing a personal touch. Recognizing that the interview process can be both exhausting and expensive, the applicants found that by having their visit arranged and provided for, their anxiety was greatly eased. The applicants were informed on clinical rotations, continuity practice experience, and conferences as well as special focus on the care of the medically underserved. While the residents provided an overview of their experiences in the program, applicants were also interested in hearing about life outside the program.

Special thanks to all those who took time out of their very busy schedules to meet with the applicants during lunches, dinners, and clinic visits. The applicants made many comments on the warm welcome they received during their visit to Baylor. As this recruitment season comes to a close I look forward to the Fall when I can put into practice the knowledge I have gained. I am no longer a rookie, but a specialist in the fine art of working under pressure. ■

## Looking for a Job?

By Dr. Charles Miranda

We should feel fortunate of the incredibly diverse opportunities that are available for Med-Peds physicians. The only problem is how do you find them and once you find them how do you objectively evaluate such positions. Here are hopefully a few helpful tips.

### When should I start looking for a job?

The earlier the better, but you better allow at least 6 months. Consider setting a time line. [www.acponline.org/counseling/index.html](http://www.acponline.org/counseling/index.html)

### What type of job are you looking for?

1. Location, location, location. Where do you want to live? Or sometimes more importantly after following you around the country for the last eight years, where does your significant other want to live?
2. To be or not to be. These questions are easier to answer. Most of you already shared with me during your interviews what you want to do. Do you want to be a generalist or sub-specialist? Are you looking for a solo, group or multi-specialty group practice? Are you tired of call and want to do shift work in an urgent care or emergency center? Do you want to be a hospitalist (whatever that is)? Do you want to be like Dave and travel abroad in international health? Or do you want the dreaded job in administration (better get your MBA, MPH or JD)?
3. All of the above have implications that are too many to list here. My opinion would only be one. That is why once you make a decision about a career path and location, talk to friends and colleagues alike about the potential implications. Make sure that you are completely comfortable with your choices.

### What do I need to get together?

First impressions go a long way. No scrubs allowed. Time to break out your professional wardrobe. A good hair day is also important. You need a CV and Cover Letter printed on a laser printer on matching, high quality bond paper with matching envelope.

1. CV- There are many different formats. Just make sure that it looks nice. My CV contains: Name, Contact Information, Personal Information, Undergraduate Education, Medical Education, Postgraduate Training, Academic Appointments, Professional Activities, Hospital Appointments, Grants, Publications and Presentations, Professional Certifications, Medical Licensure, Professional Memberships, Honors, Committees, and Languages. Sample found at [www.acponline.org/counseling/cv.htm](http://www.acponline.org/counseling/cv.htm)
2. Cover Letter - Customize it to the job opportunity you are looking for. Keep it short and focused (no more than one page). Introduce yourself and sell yourself by highlighting your training and special interests. Highlight why the job appeals to you. Include contact information.
3. No need to send references until you are asked to send them. When you are asked, make sure to get a letter from someone who knows you well. Send your reference a copy of your CV and customize another cover letter for them. You usually need two to three letters of reference. Don't send more than what they ask for. Most get a letter from their program director and then one from a Medicine faculty and another from a Pediatrics faculty.

(continued page 3)

## Books at MLK

By Dr. Hilary Suzawa

Tihhs djfefs dmfs dio mlaj kje jkeisj. If you were not able to read, all printed words might look like the gibberish that I wrote. At the January Internal Medicine and Pediatrics conference, Dr. Ana Malinow and Ms. E. Ann Rayburn from Ben Taub General Hospital discussed the pervasiveness of illiteracy in the United States (and especially in Texas) and the importance of promoting reading. Every day in clinical practice physicians and patients are confronted by the printed word. Patients are given pamphlets to encourage patient education. Bottles of medications have printed names and instructions. For some patients, medication non-compliance may stem from an inability to understand the medication bottle rather than from a disinterested attitude.

At Ben Taub General Hospital the BOOKS program has been distributing free age-appropriate books to pediatric patients through the pediatric emergency center. Many Med-Peds residents rotating through the EC have participated in the process. This year the program has new additions including a library room open on Tuesdays and Thursdays and located on the fifth floor across from the 5E pediatric ward. Additionally, the Ben Taub BOOKS program has the goal of expanding the program to Harris County clinics in the community.



The first Harris County community clinic to begin participating in the BOOKS program is our own MLK MedPeds clinic. In January, Ann Rayburn provided the clinic with a "Half Pint" Books library cart stocked with children's books from the Ben Taub BOOKS program. Residents in clinic should give a book to each pediatric patient seen.

For record purposes, there is a black binder in which the resident must write the patient's name and medical record number and check off the type of book given (board, picture, paper, adult).

Members of our residency program are currently working on applying for grants for continued support of the BOOKS program at MLK. We have also applied to participate in the Reach Out and Read program based out of Boston, Massachusetts and are awaiting a reply from that organization.

There are many volunteer opportunities involved with the BOOKS program at both Ben Taub Hospital and MLK clinic. Residents who are interested or who know community volunteers who are interested should contact either one of the Med-Peds interns working on the BOOKS program (Hilary Suzawa or Andrea Wong) or the director of the Ben Taub BOOKS program. ■

### MED/PEDS CONFERENCE SCHEDULE

January 18, 2002	Dr. Ana Malinow - BOOKS Board President & Medical Di-
February 15, 2002	Dr. Julie Katkin Section of Pediatric Pulmonary "Pediatric Asthma"
March 15, 2002	TBA
April 19, 2002	TBA
May 17, 2002	TBA
June 21, 2002	TBA

*“Do not leave any stone unturned. There is no monster.com for Med-Peds positions.”*

*“One thing to look forward to after residency is that you will once again have control over your schedule.”*

*“The biggest headaches in practice are scheduling, phones and billing.”*

### Where to look for that ideal job?

Do not leave any stone unturned. There is no [monster.com](http://monster.com) for Med-Peds positions. Be prepared for an exhausting search. Do not use just one source. Many positions are not advertised. Ask your colleagues, residency alumni, attendings and program directors. Get names of people in the area where you are looking. Call or write to those people, if they do not have any openings, ask for a list of Med-Peds or multi-specialty group practices in their area. Take a look at the AAP Fellowship and ACP-ASIM Fellowship directories and look for physicians practicing in your desired location. You can also search for selected physicians on the ABIM and ABP Web sites (I use this to locate our graduates). If you know a nurse or a pharmaceutical representative in the area ask them about potential physician contacts and practices. Networking and word of mouth is often times the best way of landing that ideal job, but other resources include:

1. Local, regional and national chapters of the AAP, ACP-ASIM and AMA.
2. County medical societies.
3. PedJobs is an online job database from the AAP that has a Med-Peds section. ACP online also has a career center but not a separate Med-Peds section.
4. Med-Peds physician list server (due out soon).
5. Journals—both print and electronic versions. Try NEJM's CareerLinks. Annals of Internal Medicine and Pediatrics also list Med-Peds opportunities.
6. Bulletin board at MLK.
7. AAMC Web site lists academic positions.
8. Physician recruiters (Before you go there, ask me or someone else who is familiar with recruiters).

Now it is time to get ready for the

interview. Plan to spend at least a full day. You will want to meet the physicians who you will be working with as well as with the administrators and office staff. Take time to check out the hospitals as well as the community. Let's look at the details.

### What questions should I ask during my interview?

Ask questions to the people who are going to know or should know the answers. Clinical questions go to physicians and nurses. Administration questions go to the administrators. The biggest headaches in practice are scheduling, phones and billing. So get the details.

You will want to know about the patients. Ask about the age distribution of patients. What communities are served? Is the patient population diverse? How many new patients are seen on a monthly basis? How many newborns per month? Is there a nice mix between acute and chronic illness? Does the practice care for both inpatients and outpatients?

One thing to look forward to after residency is that you will once again have control over your schedule. Workload—what is expected regarding patient volume and work hours? Who controls your schedule? Who approves and how are schedule changes made? How is hospital work structured? How are patients scheduled? What is the design of the patient schedules? How much time is allocated for different visits? How long does it take for patients to get acute care or well care appointments? How are new patients distributed? What is the intensity, frequency and structure for call?

Let's move over to the office. How is it set up? How is the staff structured? Is there a lot of staff turnover? If applicable, is there a bilingual staff member? How is the phone system structured? How are phone calls distributed? Who takes triage calls? How are medication refills handled? Who processes referrals? What is the referral pattern of the practice? What is the role of the office manager? Who makes

personnel decisions? Are there regularly scheduled meetings? What is the method of charting? What do the charts and chart documents look like? Is there a medical record clerk? Are there mid-level providers? Is patient education material available? How is patient check-in and check-out structured?

Questions for the administrators revolve around organizational structure, decision making, personnel issues, billing and the financial health of the practice. Physicians may also have administrative responsibilities. Ask what is expected of you. Ask about the billing process from beginning to end. What is the collection rate? How much is written off as insurance write offs and as bad debt? What percentage of net revenues goes to overhead? What is the aged accounts receivables? Who owns the practice building? What is the process for buying in? What is the capital expenditures and debt expense? How are physicians compensated? Is it straight salary, base salary plus bonus or production based? Are bonuses based on productivity, patient satisfaction, efficiency, citizenship, research or teaching? Look at the benefits package and ask about paid vacation, CME, journals, health insurance, life insurance, disability insurance, malpractice insurance (don't forget tail coverage), moving expenses, and loan repayment just to name a few.

So you have asked all of these questions and have some answers. Now what you need is a benchmark for your type of practice in that part of the country. The Medical Group Management Association (MGMA) has this information [www.mgma.com](http://www.mgma.com). You may need to find a member to help you.

**Follow up your interview with a phone call or letter.** Express your gratitude, summarize what you liked, cite details, re-iterate your talents and contributions and set a time-line for future communications. Last year's retreat prepared you for the next step—the Contract. ■

## Chief Resident's Corner

We have come past the midpoint of the academic year. Everyone's patience, dedication and hard work have been much appreciated. This year's monthly conferences have received very positive feedback. We have been honored to have distinguished faculty from a variety of specialties provide us with their insights and pearls. The current format will continue for the remainder of the year. The Med-Peds retreat has been tentatively planned for April 5th. We will try to make arrangements with the Medicine and Pediatric departments to assure everyone's attendance. Should a conflict arise, please contact us immediately (we know not all rotations are created equal).

The Chiefs would like to acknowledge the new intern class for their strong first half performance. The light at the end of the intern tunnel will be here before you know it (a life with much less call awaits you)! Special mention goes to Hillary Suzawa and Andrea Wong for getting the BOOKS program at the MLK Clinic off the ground. Please utilize this great resource for all of our pediatric patients.

The social scene took a break over the holidays, but happy hour will resume in February. Plans are under way for monthly gatherings including picnic/volleyball, night out at an Aeros or Astros game, pool parties and possibly - paintball? or something where we inflict pain on one another besides through admissions - funding permitting). If you have any suggestions or can help in some way (you have a friend whose father owns the Aeros, etc.), get in touch with the Chiefs! Another recruiting season is almost over. We will learn about our new recruits in late March. Thanks to all those who took time from their busy schedules to meet, give tours, or have lunch/dinner with applicants.

Finally, the Chiefs would like to give a big thanks to the person behind the scenes who has made this year tick - Cindy Alegria, our administrative assistant (she is our own Nova!). Take the time to introduce yourself to Cindy (if you have not yet done so) at the next MedPeds conference. She has been working diligently to organize our conferences and social events, and making sure we are in the right place at the right time! In her first 6 months she has had a lot learn about our unusual way of life, so please show her your appreciation.

Have a great finish to the year, and we'll see you on the wards! ▣

- Anoop and Suneil

## BIRTHDAY'S

### JANUARY

Amy Lothian 15  
David Hilmers 28

### FEBRUARY

Alva Roche-Green 2  
Hilary Suzawa 19  
Debra Patt 26

### MARCH

Mammen Maliakkal 1  
David Elvin 11  
Susanna Goheen 21  
Cindy Alegria 26  
Joydip Roy 29



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## Continuity Clinic News

By Dr. Cynthia Peacock

There have been some great suggestions from the residents on how to improve the clinic and some of those changes have been implemented. Lighted speculums are now available and we will need everyone's cooperation regarding getting the light back to Irma at the end of the day so she can lock them up. Also Dr. Wong and Dr. Suzawa worked on getting the BOOKS Program into the clinic so our pediatric population can get some reading time in while waiting for their doctor to see them. If you are interested and wish to help, please talk with either resident.

Dr. Hilmers has been so kind as to install MKSAP on our clinic computer so if you have any free time in clinic, start practicing some questions. Try questions in the area that you may not have done well on the medicine inservice board. The first of the year will start resident lead lecture at the beginning of each clinic. Stay on the lookout for more information to come regarding individual times for each resident to present.

Some new changes in clinic practice are starting. When referring to the social worker, she would like a red flag stating reason for the referral. Also remember to check your mailbox at the beginning of clinic. All labs must have a final disposition that day so if you need a chart to do that, Irma needs time to get it up from medical records.

There is now a bulletin board to post the many job request we get in for the graduating residents. There is also a binder in the clinic office that lists job opportunities. Remember if you have any questions about job opportunities, any of the med-peds faculty would love to help in your search for that perfect position! ▣

## Announcements

**Evan Kenneth Latta** was born at 12:30 p.m. on December 12, 2001. He weighed 7 lbs, 11 ozs. Congratulations to Dan and Melissa.

Our very own **Anoop Agrawal** will be traveling to Botswana for 5 weeks beginning on February 25, 2002.

Congratulations to **Debra Patt** and **Rebecca Gross** who will soon be hearing the pitter patter of little feet. ▣

### SOCIAL CALENDAR

February 15, 2002	Med-Peds Gathering hosted by Dr. Julie Olivio 6:30 p.m. until ??? 6030 Cerritos Drive; Houston, Texas Phone: (713) 729-5227
March 17, 2002	St. Patrick Day's Party hosted by Dr. Jenny Hinson 7:00 p.m. until ??? 5947 Vickijohn; Houston, Texas Phone: (713) 729-0925
April 5, 2002	Med-Peds Annual Retreat