



# CITYMD

## URGENT CARE FELLOWSHIP

**The Urgent Care Fellowship** is a 20 week program that combines clinical rotations and didactic training. It is offered to graduates of accredited Family Medicine programs who wish to develop their knowledge base and procedural skills in the field of Urgent Care Medicine.

FELLOWSHIP DIRECTOR:	<b>Hong Choi, MD MPH FAAEM</b>
STATUS:	<b>Non-ACGME Accredited Program</b>
FUNDING:	<b>Self-Funded</b>
ELIGIBILITY:	<b>Graduates of Accredited Residencies in Family Medicine</b>
LENGTH OF TRAINING:	<b>20 weeks</b>
SIZE OF FELLOWSHIP:	<b>Eight Urgent Care Fellows per year</b>
FELLOWSHIP START DATE:	<b>August 1, 2018</b>
CONTACT:	<b>Hong Choi fellowship@citymd.net</b>

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## URGENT CARE FELLOWSHIP MISSION

To provide a supply of formally trained physicians capable of performing at the highest levels of clinical competency and efficiency necessary for success in an urgent care setting.

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## **PROGRAM SPECIFICS**

Competitive compensation plus benefits.

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## **CURRICULUM**

The curriculum of the 20 week program is defined by development of knowledge base in Core Subjects and procedural proficiency in Skills Workshops. This is accomplished through group session didactics and workshops, as well as individual clinical mentoring and reviews. Evaluations are performed by multiple evaluators in different capacities. A minimum of 3 physicians will anchor the didactic/workshop curriculum and at least 4 providers will need to serve as clinical mentors.

Wednesdays will be reserved as the didactic and workshop day for the fellows. A didactic subject and a workshop skill for the week will be reviewed each Wednesday, with an expectation that fellows will document completion and mastery of each subject or skill on a weekly basis. All other days will be available for clinical shifts.

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## **CORE SUBJECTS**

Neuro  
Eye  
ENT  
Oral  
Chest  
Abdomen  
GU  
GYN  
Musculoskeletal  
Derm  
ID/Public Health  
Wounds  
Peds  
Occupational  
Appendix of Detailed Curriculum Topics

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## **SKILLS WORKSHOPS**

Radiology (Plain Films)  
Splinting  
Suturing  
Phlebotomy, IV, and Injections  
EKG  
I&D  
Eye, Ear, Nose procedures  
FB removal  
Advanced Imaging  
Test Interpretation  
Patient Interaction

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## **EVALUATION**

Chart Review  
Subject Assessment  
Procedure Assessment  
Mentor Evaluation  
360 Evaluation

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## **INSTRUCTORS**

Hong Choi  
Pamela Arsove  
Vincent D'Amore  
Frank Illuzzi

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## **MENTORS**

Hong Choi  
Pamela Arsove  
Vincent D'Amore  
Frank Illuzzi  
Dmitry Volfson  
Abel Cherian  
Phil Hew  
Katherine Miao  
Dawne Kort  
Yi-An Lee  
Daniel Cavallo

WEEK	SUN	MON	TUES	WED	THU	FRI	SAT
1				Orientation Pre-Test Wound/I&D/Suture	Orientation Splint/Inject/IV	Shadow: Culture Flow Site Intro	
2		EMR		Chest/EKG			
3				Chest/Rads			
4				MSK/Rads			
5				MSK/Splint			
6				Abdomen			
7				Neuro/Adv Imaging			
8				Derm/Test Interpretation			
9				ID/Antibiotic Selection			
10				OB/GYN			
11				Eye & Eye procedures			
12				Peds			
13				ENT & ENT procedures			
14				GU			
15				OMFS/Local Anesthesia			
16				Occ Health/Coding			
17				Patient Interaction/Flow			
18				Public/Pop Health			
19				Capstone Cases			
20				Capstone Cases			

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## APPENDIX: CURRICULUM TOPICS

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### Neurologic Complaints

#### Approach & Lurking Acuity

Headache	Tension Cluster Migraine Unilateral vs Bilateral Sudden vs Gradual onset
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Dizziness	Vertigo Lightheadedness Weakness
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Syncope	Vasovagal Neurogenic Cardiogenic
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Seizures	New onset Febrile Pediatric Adult
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Minor Head Injury  
Concussion  
CVA / TIA  
Bell's Palsy  
Dystonic Reactions  
Hiccups  
Neuropathies  
CO exposure

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### Eye Complaints

#### Approach & Lurking Acuity

Exam of the Eye	Fundoscopy Fluorescein Wood's lamp
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Red eye vs Painful Eye

Conjunctivitis	Infectious Allergic Chemical
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Blepharitis

Subconjunctival hemorrhage

Stye

## Eye Complaints

Corneal Injury	Corneal Abrasion Corneal Foreign Body Corneal Ulcer
Herpes Keratitis	
Iritis	
Contact Lens complaints	Adherent contact Retained fragment
Chemical burn	Morgan Lens use
Light Injuries	UV Keratoconjunctivitis Solar Retinopathy
Periorbital vs Orbital cellulitis	
Ocular Trauma	Periorbital hematoma Hyphema Proptosis Orbital Fx Globe Rupture
Lacerations around eye	
Allergic reactions	

## Ear Complaints

Approach & Lurking Acuity	
Exam of the Ear	
Otitis media	
Otitis externa	
FB ear canal	
Impacted cerumen removal	
Hearing evaluation	
TM perforation	
Mastoiditis	
Embedded earring	
Infected piercing	
Cauliflower ear	
Lacerations of ear	Laceration of ear lobe Laceration of cartilage

## Nose & Sinus Complaints

Approach & Lurking Acuity	
Sinusitis	
Allergic rhinitis	
Epistaxis	Anterior vs Posterior Rapid Rhino Silver Nitrate cautery
Nasal foreign body	
Nasal infection	Nasal Abscess - MRSA Hutchinson's Sign
Nasal trauma	Fracture Septal Hematoma

## Throat Complaints

Approach & Lurking Acuity	
Allergic reaction / Anaphylaxis	
Pharyngitis	
Group A Strep	RADT Throat Culture
Peritonsillar Abscess	
Epiglottitis	
Croup	
Laryngitis	
FB sensation	Fish bone Chicken bone
Mononucleosis	
Fusobacterium	

## Oral and Dental Complaints

Approach & Lurking Acuity	
Emergencies	Angioedema Ludwig's Angina Uvular edema
Aphthous Ulce	
Mucocele	
Oral HSV	
Thrush	

## Oral and Dental Complaints

Gingival disease	Receding gums Gingivitis Gingival abscess
Dental pain	Caries Abscesses Tooth Fracture Loose tooth Dry Socket
Complications from dental procedures	Bleeding Buccal entrapment on device
Lacerations	Lip Buccal Tongue
Parotid swelling	Mumps Parotitis Salivary stone
TMJ syndrome	

## Chest Complaints

Approach	Stat labs Rads DI Consults
Lurking Acuity	ACS PE Dissection PTX
Chest pain	Risk stratification Testing Disposition options
Cough	Postnasal drip Bronchitis Pneumonia PE CHF COPD
Dypnea	Asthma/COPD CHF PE ACS PTX
Chest Wall Pain	
Rib pain/fx	
Other (?)	



Abdomen/  
Flank/  
GI complaints

Approach	Differential by Location
	UCG Urine dip Labs DI Referrals Discharge instructions
Lurking Acuity	Age>50 Appendicitis Diverticulitis AAA Comorbidities (e.g. Afib → Bowel Ischemia) Low abdominal pain → Genital exam
Appendicitis	
Diverticulitis	
Biliary disease	Colic vs infection Acalculus Testing
Pancreatic disease	
Diarrhea	Travelers Food-borne Infectious - Viral/Bacterial C.diff Colitis Stool panel utility Consider Appendicitis
Cystitis / Pyelonephritis	
Flank Pain	Renal colic Consider AAA
GERD / PUD	
Rectal Bleeding / Pain	
Nausea / Vomiting	
Constipation	Consider Bowel obstruction
Confounding factors / Comorbidities	Pregnancy DM Previous surgeries Previous hx
Other	FB ingestion Impacted food bolus Hiccups

## GU Complaints

Approach	Male Female Transgender
Lurking Acuity	
STD testing / screening	
STD treatment	Gonorrhea Chlamydia Syphilis Herpes HIV (PEP)
Urine Testing	Urine dip Urine HcG Urine Culture Urine Microbiograms
Urinary symptoms	Dysuria Frequency Urgency Hematuria
UTI	Lower Urinary Tract Upper Urinary Tract
Urethritis / Cervicitis	
Rashes / Lesions	
Incontinence / Retention	
Penile disorders	Balanitis Phimosis Paraphimosis Priapism Penile Fx Urethral stricture
Testicular disorders	Epididymitis Orchitis Torsion Varicocele Mass
Prostate disorders	Prostatitis Prostatic Hypertrophy

GYN Complaints	Approach & Lurking Acuity	Urine HcG - Urine HcG +
	Vaginal Discharge	
	Vaginal Bleeding, HcG -	Abnormal Uterine Bleed Fibroids Postmenopausal Bleed Trauma
	Vaginal Bleeding, HcG +	Missed Ab Threatened Ab Ectopic Placenta Previa Placental Abruption Rh Incompatibility
	Pelvic Pain, HcG -	PID Torsion Ovarian Cyst Mittelschmerz Fibroids Injury
	Birth control / Emergency contraception	
	Vulvar disorder	Rashes Lesions Bartholin cysts Folliculitis Infected piercings
	Vaginal / Cervical disorder	Discharges Lesions Cervicitis CMT PID Retained FB IUD removal
	Uterine disorder	Abnormal Uterine Bleed Fibroids Endometritis Endometriosis Uterine prolapse
	Pregnancy Pearls	Early Pregnancy Late Pregnancy Post-Termination / D&C Post-Partum Pre-eclampsia

## GYN Complaints

Premature labor  
 Ectopic pregnancy  
 Molar pregnancy  
 Placenta Previa  
 Placental Abruption  
 Minor trauma in pregnancy  
 Safe medications

## Musculoskeletal Complaints

Approach	
Exam of Muscle & Joint	Active vs Passive ROM Exam against resistance Bedside testing
Lurking Acuity	Compartment syndrome Necrotizing fasciitis C-spine injuries Supracondylar Fx
Muscle & Tendon disorder	Sprains Tears / Rupture Spasms Tendonitis
Ligament disorder	Sprain Tears / Rupture
Joint disorder	Effusion Inflammation Infection
Fractures and Dislocations	Examination Immobilization Reduction
TMJ	
Neck strain / spasm	Torticollis Dystonic reaction
Shoulder injuries	Bursitis Arthritis Effusion Tendonitis Rotator cuff injuries AC separation Shoulder dislocations Humerus Fx Scapula Fx Clavicle Fx

## Musculoskeletal Complaints

Humerus/Elbow/Forearm	<ul style="list-style-type: none"> <li>Humeral head Fx</li> <li>Supracondylar Fx</li> <li>Nursemaid's elbow</li> <li>Tennis elbow</li> <li>Radial head Fx</li> <li>Monteggia / Galeazzi</li> <li>Colle's Fx</li> <li>Peripheral nerve palsy</li> <li>Immobilization / Splint</li> <li>Disposition</li> </ul>
Wrist / Hand / Finger	<ul style="list-style-type: none"> <li>Scaphoid Fx</li> <li>Lunate Fx</li> <li>Metacarpal Fx</li> <li>Finger Fx &amp; Dislocations Hand</li> <li>lacerations topics - (Tendons evaluation, DIP PIP joint exam, No Man's Land / Zone 2 injury)</li> <li>Ganglion cysts</li> <li>Tenosynovitis</li> <li>Paronychia</li> <li>Felon</li> <li>Subungual hematoma</li> <li>Crush injury</li> <li>Fishhook injury</li> <li>Ring removal</li> </ul>
Hip & Thigh	<ul style="list-style-type: none"> <li>Femoral Neck Fx</li> <li>Hip dislocation</li> <li>Pelvic Fx</li> <li>Femoral hernia</li> <li>GU pain</li> <li>DVT</li> <li>Groin muscle injury</li> </ul>
Knee Pain / Injury	<ul style="list-style-type: none"> <li>Arthritis</li> <li>Tendonitis</li> <li>Bursitis</li> <li>Effusion</li> <li>Septic arthritis</li> <li>Meniscus injury</li> <li>ACL/MCL</li> <li>Patellar dislocation</li> <li>Patellar Fx</li> <li>Tendon rupture</li> <li>Osgood Schlatter</li> </ul>
Lower leg / Calf	<ul style="list-style-type: none"> <li>DVT</li> <li>Compartment</li> <li>Achilles rupture</li> <li>Baker's Cyst</li> </ul>

## Musculoskeletal Complaints

Ankle and Foot

Maisonneuve Fx  
 High Ankle Sprain  
 Ankle Sprain (ATF)  
 Ankle Fracture (Tib/Fib)  
 Achilles tendinopathy  
 Achilles rupture  
 Calcaneal Fx  
 Plantar fasciitis  
 Metatarsal Fx  
 Toe Fx

## Derm Complaints

Approach & Lurking Acuity

Allergic reaction / Anaphylaxis

SJS/TEN

Contact dermatitis

Insect bites

Bed bugs  
 Scabies

Spider bites

Brown Recluse Spider

Infection

Necrotizing fasciitis  
 Cellulitis  
 Folliculitis  
 Abscess  
 Impetigo  
 Erysipelas

Parasitic infections

Marine infection / envenomation

Jellyfish sting  
 Scombroid  
 Ciguatera

Burns

Sunburn  
 Lime burn / phytophotodermatitis  
 Thermal  
 Chemical  
 Electric

## Infectious Disease/ Public Health

Travel Medicine

Vaccines  
Malaria prophylaxis  
Yellow fever cards  
Antibiotic prophylaxis  
Motion sickness  
Altitude sickness

Tick Diseases

Mosquito diseases

Epidemic diseases

Influenza  
Zika  
Legionella  
Ebola  
Mumps  
Measles

DOH reportable diseases

STIs

Syphilis  
Gonorrhea  
Chlamydia  
Hepatitis  
HIV

Post-Exposure Prophylaxis

Animal bites

Antibiotic prophylaxis  
Wound management  
Reporting

Rabies prophylaxis / series

## Wounds

Approach

Wound Mgmt Principles  
Suture selection  
Suture duration

Lurking Acuity

Necrotizing fasciitis  
Animal / Human Bite  
Fight Bite  
Laceration of Hands/Face  
Abscess of Abdomen/Face  
Puncture / Laceration over the joint

Infection

Cellulitis  
Abscess

Skin injuries

Lacerations  
Puncture wounds  
Avulsions  
Skin tears  
Burns  
FB removal

## Pediatric Complaints

Approach	Sick vs Not sick PO tolerance Interactive Reassurance RTC in 24 hours
Lurking Acuity	Unable to bear weight Working to breathe Repeatedly tender Abd
Common presentations	Age 0-3 mo Age 3-36 mo Age 3-8y Age >8
Pediatric dosing	Weight-based medications Use of pediatric order set
Rashes	Viral Measles Varicella Vaccine Strep Eczema Coxsackie
Infections	AOM Sinusitis Pharyngitis Strep Fusobacterium
Cough	Approach PNA Bronchial / Bronchiolar Dz Reactive Airway Disease
FB	If X-Ray negative, then US Neck Abdomen Magnets: 1 vs 2
Trauma / Injury	Salter-Harris Fx Torus Fx Toxic Synovitis Handlebar Injury Ring ankle Groin/hip pain - SCFE



## Pediatric Complaints

Special considerations	Mandated Reporters Emancipated Minor Domestic Abuse Child Abuse Documentation of non-abuse
School / Camp physicals	
GU/GYN	UTI Vulvovaginitis
Chest Pain	Not PE or ACS Brugada Pneumonia
Abdominal Pain	Appendicitis - US Testes pathology Dynamic pain PNA on Diaphragm Constipation IBD Intussusception Dispo

## Occupational Health

Worker's Compensation
DOT physical
Employee Health
Corp accounts