

Internal Medicine Residency Program

St. Mary Medical Center • Long Beach, CA

A Day in the Life

The schedules in this presentation illustrate typical rotation days. Activities and clinical responsibilities vary with the rotation and patient-care needs.

Elective Rotation

The schedules below illustrate typical rotation days. Activities and clinical responsibilities vary with the rotation and patient-care needs.

8:00–8:30 a.m.

Arrive, receive the patient list from the attending, and begin pre-rounding.

Morning–11:00 a.m.

Evaluate assigned patients, review clinical data, and work on progress notes.

11:00 a.m.–3:00 p.m.

Review patients with the subspecialty attending and evaluate new consultations, with protected noon didactics.

12:30–1:30 p.m.

Protected daily didactics.

After 3:00 p.m.

Complete follow-up care, documentation, and remaining clinical responsibilities; no routine new consultations are assigned.

3:00–4:00 p.m.
Mon–Thu

Protected afternoon report.

Inpatient Wards

The schedules below illustrate typical rotation days. Activities and clinical responsibilities vary with the rotation and patient-care needs.

6:30 a.m.	Receive sign-out from the night-float team.
6:30–9:00 a.m.	Pre-round, review overnight events, and begin progress notes.
9:00–9:30 a.m.	Multidisciplinary rounds with case management, social work, nursing, and physical therapy.
9:30 a.m.–12:30 p.m.	Bedside rounds with the attending and care team.
12:30–1:30 p.m.	Protected daily didactics.
1:30–3:00 p.m.	Complete notes and orders and follow up on patient-care needs.
3:00–4:00 p.m. Mon–Thu	Protected afternoon report.
4:00–6:30 p.m.	Complete remaining clinical responsibilities and sign out to the night-float team.

Residents receive one scheduled day off each week. Ward teams take call every fourth day from 6:30 a.m. to 6:30 p.m. The night-float team provides overnight admission coverage from 6:30 p.m. to 6:30 a.m.

Intensive Care Unit

The schedules below illustrate typical rotation days. Activities and clinical responsibilities vary with the rotation and patient-care needs.

6:30 a.m.

Receive sign-out from the night-float team.

6:30–9:00 a.m.

Pre-round and review overnight clinical developments.

9:00 a.m.–12:30 p.m.

Multidisciplinary rounds with the attending, nursing staff, pharmacist, and critical-care team.

12:30–1:30 p.m.

Protected daily didactics.

Afternoon

Follow up on care plans, evaluate admissions, perform procedures, complete documentation, and respond to changes in patients' clinical conditions, with protected afternoon report.

3:00–4:00 p.m.
Mon–Thu

Protected afternoon report.

6:30 p.m.

Sign out to the ICU night-float team.

Continuity clinic

During the +1 ambulatory week, residents attend continuity clinic Monday through Friday, from 8:30 a.m. to 4:30 p.m., without inpatient service responsibilities.



Schedule

Monday – Friday

8:30 a.m. – 4:30 p.m.



Clinical Focus

**Dedicated
Ambulatory Patient
Care**



Protected Time

**Zero Inpatient Service
Responsibilities**