

# Mid-Valley CHC *Continuity Clinics*

## UCLA/OLIVE VIEW RESIDENCY PROGRAM, INTERNAL MEDICINE

Welcome to your continuity clinics at Mid-Valley CHC (MVCHC) adult clinic. Our goal is to train you to comprehensively care for patients with a broad range of medical problems in an ambulatory care setting. You will provide initial evaluations for new patients, continuing care for patients with chronic illnesses, as well as episodic care for patients with acute problems.

### Logistics

- Clinic Hours: 8:00 am - 12:00 pm  
1:10 am - 5:00 pm  
(For those coming to MV only for afternoon clinic, attend noon Zoom lectures either at MV or at OV before driving down)
- Mid-Valley Comprehensive Health Clinic is located at:  
**7515 Van Nuys Blvd** (we are the smaller building on the corner of Van Nuys Blvd and Covello Street)  
(From OV: take 210 W to 5 S to 405 S. Exit Sherman Way and turn right off the freeway. Turn right onto Saticoy. Enter the parking structure from Saticoy Ave or Van Nuys Blvd)  
**Adult Primary Care clinic is on 2<sup>nd</sup> floor**
- **Call (818) 627-3268, (818) 627-3221, or (818) 627-3219** if you are running late. If you cannot come to clinic, call the chief residents first to arrange coverage. Any continuity clinic changes, including requests to leave early, are done through the chief residents. Contact them before discussing it with any of the attendings at Mid-Valley. Notify attendings at the beginning of clinic.
- Check-in with attendings upon arrival or start of your telework session. You are assigned to work with a particular attending each session, but feel free to present to other attendings if they are available and not seeing patients of their own. (Attending assignments posted in the workrooms and at the nursing station).
- PGY1: 2 patients during first block, then 3 patients through December, 3-4 patients per session rest of the year (mostly 4)  
PGY2: 5 patients per session  
PGY3: 6 patients per session  
\*\*Any re-distribution of patients to medical students or if a resident is falling behind will be done solely at the discretion of the attending. Expect to help out if you have a light clinic.
- Review Roles and Responsibilities and Resident Disposition Flow Handouts
- Every Tuesday, there is a **Noon Conference** in conjunction with UCLA Family Medicine on the 5<sup>th</sup> Floor conference room with lectures, clinical updates and case presentations. Lunch will be provided on those days. You are strongly encouraged to attend these conferences.
- Remote broadcast of Olive View Noon Conferences lectures at Mid-Valley available through Zoom
- **Always check-out with your attending and your CMA before you leave the clinic or telework session.**  
\*\*Clinic notes should be completed on the day of clinic, discuss any issues with your attending

## **Documentation:**

- If you didn't document something, it didn't happen. Make sure all your documentation is clear, accurate and in Powerchart. Do not use abbreviations unless it is commonly recognized by the average clinician. Take advantage of smart phrases instead. Progress notes are available to patients for viewing through Mywellness portal.
- Note Type (under Documentation)  
Continuity visits, FTF or phone, (majority of visits): “**Adult Primary Care Outpt Provider Note**”  
Initial Health Assessment (IHA) or Annual Physical visits, FTF or phone, “**Ambulatory IHA Provider Note**”  
Other Phone calls to patient: “**Phone Message/Call**”
- Title all notes **MV IM-** to better identify in Powerchart
- Refer to Telephone Visit Guidelines for phone visits workflow
- **Always** review nursing intake entries (“Adult Amb Quick Intake), including depression/anxiety screening and pain scale
- **Always** review “**ALL**” documents in Powerchart (we often have a lot of communication with patients between clinic visit). Records before 11/2/2015 may be available in Powerchart under the date 11/2/2015.
- All new patient for IHA will need a Staying Healthy Assessment (SHA) form completed and reviewed by their provider. Make sure you print your name, sign and date these yellow forms and give them to your CMA for scanning into Powerchart. Also click “Done Elsewhere” under “Staying Health Assessment” in the Health Maintenance tab

## **Referrals:**

- Referrals to almost all specialists/sub-specialists are sent through eConsult. All eConsults at MV will be initiated by the residents. Please document the **eConsult ID number** in your note to confirm submission. At times you may be asked to use the attending's sign-in to initiate an eConsult.
- For Diabetes Education (refer through Ambulatory Communication, Amb Com)  
New Onset Diabetes: Health Educator  
Insulin Teaching for Hgb A1C < 10: Nurse Directed Clinic  
Insulin Teaching for high risk Hgb A1C > 10: Care Manager  
\*\*Nutrition Consult through eConsult (Many informational resources on eConsult as well)
- Referrals to Medical Clearance Clinic are done by emailing Dr. Michael Rotblatt at OVMC.
- Referrals to Anticoagulation Clinic (ACC) are sent via message through Powerchart Communication to “OVM – Coumadin – ED/UC Urgent Follow Up”

- **All** referrals to Ophthalmology need **visual acuity** included in your referral regardless of the reason.
- Referrals to the following clinics at MVCHC are done by an “Amb Com” order:
  - MV Women’s/procedure (Colposcopy/EMB) clinics
  - MV Prenatal clinic
  - MV Musculoskeletal (MSK) clinic, do not refer chronic low back pain
  - MV Procedure Clinics (include specific details of what you are asking them to do)
  - MV Retinal Camera (Same Day appointments may be available)
- Subspecialty clinic are available at MVCHC. “Amb Com” order to schedule an appointment only if the patient is already established in the clinic and just needs a follow-up appointment. Any patient new to the clinic or not seen for >1 year will need a new referrals through eConsult.
  - Cardiology, Dermatology, Podiatry
  - Ophthalmology and optometry (MV or OV determined by reviewer)
  - Endocrine (DM Clinic, mostly for patients on concentrated insulin)

### **Miscellaneous**

- Use **TWO** patient identifiers with every patient interaction whether in person or over the phone (Name, DOB, SSN). You will call patients from the waiting area to bring into your room for the visit. Make sure to confirm you have the correct patient.
- **You must have a chaperone for any sensitive exam (GU, rectal, breast...) even for patients with same gender as examiner.** Ask your patient whether they prefer a male or female chaperone. Document the name of your chaperone in your note.
- Missed or Broken Appointments (BA) will be handled by the attending. Please update the attending with any pertinent information you may have about patient f/u that may have come up during your scrubbing.
- Any changes in patient empanelment, CERF, will be done by the attending.
- EKG, Accucheck, Hemocue, pulse oximetry, plain x-ray including CXR, urine dipstick, and urine pregnancy test are the only tests done STAT in the clinic (order these early in the visit and notify your CMA). Make sure you review your STAT results before leaving the clinic. All other tests are sent to OVMC and results would not be available until the next day.
- We have very limited equipment to deal with emergencies. In case of emergency, patients are transported to hospitals by either 911 paramedics or non-emergent transportation. Let your attending know as soon as you realize the patient needs to be transported.
- Urgent at MVCHC is open Monday through Saturday 8 AM to 8 PM.
- Maintain your Powerchart inbox and eConsult inboxes regularly. (see attached “Addendum B”)

Finally, enjoy your time at here and good luck. Let us know if you have any suggestions to improve your experience at Mid-Valley CHC.

Your Mid-Valley Attendings

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