Guide to GI Outpatient Clinics B/C

Ver 1.1 11/25/19

Welcome to your outpatient GI clinic experience! We are happy to have you here so you can learn, we can teach, and our patients can get the best care around. Here are some pointers to make the clinics run smoothly:

Clinic B (2nd and 4th Mondays of the month, 8-12)

- Typically patients are here for pre-endoscopy evaluations in the setting of complex disease (e.g. on anti-coagulation, have liver disease, need ERCP / EUS) and/or diagnostic evaluation. We don't typically have patients get return visits to this clinic they get plugged into one of our other longitudinal follow-ups if needed at all (typically clinic C, IBD clinic with Dr. Toy, or a liver clinic with Dr. Beaven).
- Please look for patients on the OVM GI Resident list in Orchid to find patients

Clinic C (1st, 3rd, and 5th [if there are five] Mondays of the month, 8-12)

- Typically patients are here for new workups and longitudinal follow-up. You will see a wide variety of cases here from abdominal pain, IBD, liver disease, GERD, etc...
- Please look for patients on the OVM GI Resident & OVM GI Prime Plus lists.

General Thoughts That Apply to Both Clinic B & C

- Please sign up for patients by putting your name in the "post-it" note field on the list. Sometimes the nursing staff use this space to write little notes like, "Patient arrived late," or "Patient vitaled." I have asked them not to do this as the MDs then think someone has already signed up for the patient and the patient ends up waiting forever.
- **Every patient needs to be "Med Rec'd"** ask if you don't know how to do this and if you are not familiar with the medications, please do this with your attending.
- There is a paper list hanging on one of the clinic consult room doors for each clinic. Please write your name at the top of one column, indicate your level of training, and just write the last name of each patient you see as you go. This is important both for the IM training program to keep track of your progress and because, periodically, we get a call from medical records two months later because there's a missing note – so we need to know who saw whom.
- We do our best to make sure you don't pick up any new patient after 11:45 am and we expect our faculty to step in and see patients on their own if we start getting backed up (i.e. should be obvious if that's happening by 10 am).
- Please do not spend time writing notes during a busy clinic session. Its ok to start the note and write things to jog your memory if needed. Notes should be done later once all patients are seen or at the end of the day.

Thanks for all your efforts and we will have a fun, efficient clinic if we keep things moving briskly!