

WELCOME

The Christ Hospital Internal Medicine Residency Program



The
Christ Hospital[™]
Health Network

The Christ Hospital Internal Medicine Residency

Cincinnati



The Christ Hospital

Our residency



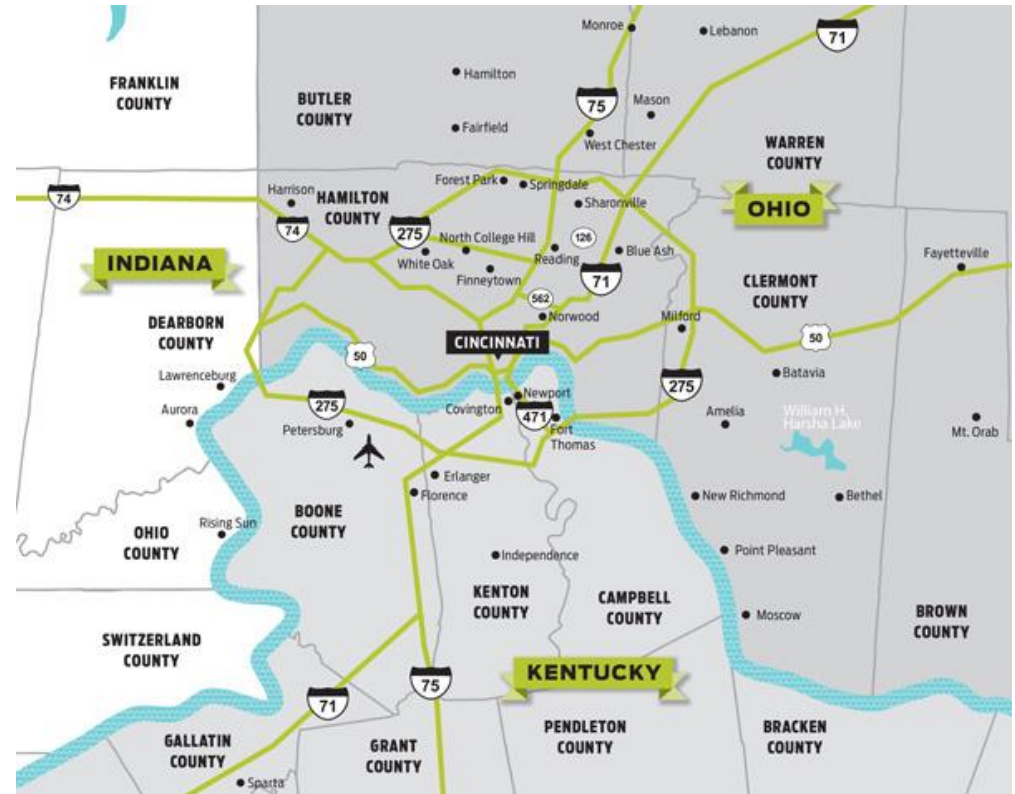
Cincinnati, Ohio



Cincinnati

The city at a glance

- Cincinnati's population is about 300,000 people with 2.1 million living in the metropolitan area



Cincinnati superlatives

#1 Fastest-growing economy in the Midwest (US Gov)

#1 Top city in the country for new grads (ZipRecruiter and Smart Asset)

#1 Best place in the nation for recreation (WalletHub)

#1 Best city of pet lovers (Wallethub)

#2 Best Midwest college city in America (WalletHub)

#2 Cities where startups are thriving (CNN Money)

#5 Most affordable cities in the country (Forbes)

#7 Quality of life in the nation (Business Facilities Metro Ranking)



What to do in Cincinnati

Professional Sports

- Cincinnati Reds
- Cincinnati Bengals
- Cincinnati Cyclones Hockey
- FC Cincinnati Soccer
- Western and Southern Tennis Tournament

Local Attractions

- Cincinnati Museum of Art
- Taft Museum
- National Underground Railroad Freedom Center
- Cincinnati Museum Center at Union Terminal
- Cincinnati Zoo
- Newport Aquarium
- Krohn Conservatory
- Jack Casino

• Riverbend Music Center

- Aronoff Center
- Cincinnati Music Hall
- Playhouse in the Park
- Ensemble Theatre Cincinnati
- Kings Island

Local Events

- Flying Pig Marathon
- Oktoberfest
- Blink

Parks

- Hamilton County Parks
- Cincinnati Parks
- Devou Park
- Ohio State Parks
- Kentucky State Parks
- Etc, etc, etc

Cincinnati attractions



The Christ Hospital



The Christ Hospital's vision & mission

Vision

- We will be a national leader in clinical excellence and patient experience.

Mission

- To provide the finest patient experience and improve the health of our community.
- To be recognized as a nationwide top 10 community hospital

Christ Hospital's core values



Excellence

Compassion

Efficiency

Leadership

Safety

A little bit of our 125-year history

In 1889, the Elizabeth Gamble Deaconess Home was established in Cincinnati's West End at 46 York Street. Soon afterwards, the home realized there was a significant need for medical services.

James Gamble donated a 10-bed house at 50 York Street (which was subsequently named Christ's Hospital).

By 1893, the Hospital had expanded to 3 buildings and 40 beds.



Our story continues...

In 1893, The Gamble family bought a building and 4 acres of land in Mt Auburn. After renovations were completed, the hospital moved to its current location. It was renamed The Christ Hospital in 1904.



The Christ Hospital, Cincinnati, O.

c. 1904



Christ Hospital, Cincinnati, Ohio.

South wing
c. 1915



CHRIST HOSPITAL, CINCINNATI, OHIO.

North wing
and
entrance
expansion.
1920s



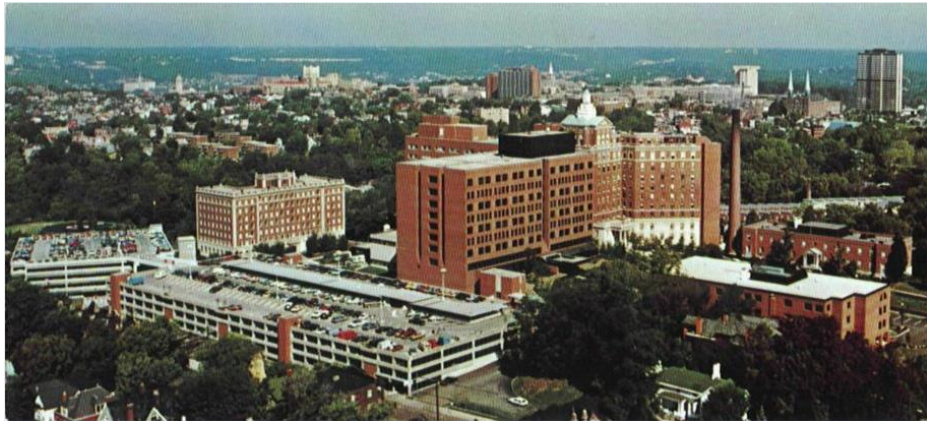
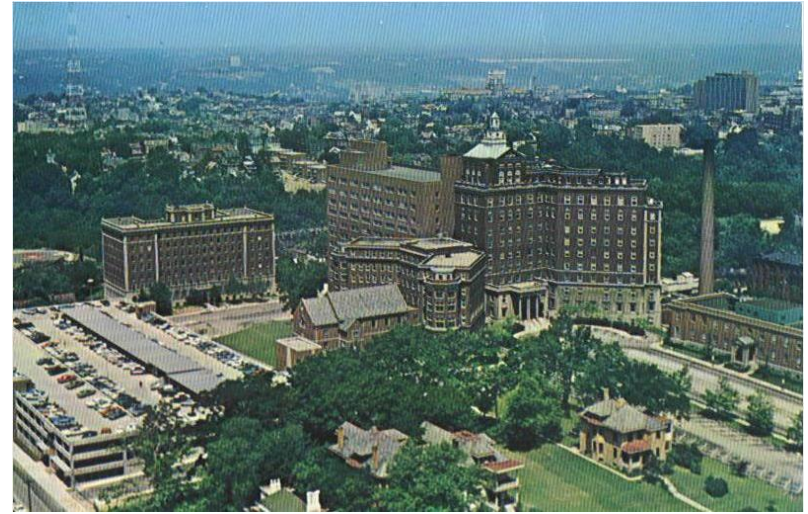
The iconic
cupola was
added c.
1930

Our story continues...



West wing
added
1960

West wing
raised to
current
height
1968.
Research
building
and
nursing
dorms
visible.



Old south
wing
razed.
New south
wing
added
1977

Heart
center
built
2003.
New
nursing
school
added
2000s



Our story continues...



Joint
and
spine
center
2015

The Christ Hospital today

555-bed tertiary acute care hospital

Serves a 15-county area with comprehensive health services

24 cardiovascular physician offices

30 primary care physician offices

10 physical/occupational therapy outpatient offices

9 testing centers, including route lab, cardiovascular testing and imaging

2 ambulatory surgery centers (and expanding)

Christ College of Nursing and Health Sciences (880+ students)

5,000+ employees



A PROUD TRADITION

- Christ Hospital as been designated Cincinnati's Most Preferred Hospital for 21 consecutive years
- HealthGrades Distinguished Hospital Award for Clinical Excellence (>95th %)
- *U.S. News & World Report* – Top 50 Hospitals 18 consecutive years
- Press Ganey Summit Award winner for inpatient satisfaction (>95 %)



A History of Innovation



- First regional hospital to admit a female physician to its staff (1902)
- Pioneers in mechanical kidney, a predecessor to dialysis (1951)
- First regional ICU (1962)
- One of the first hospitals nationally to offer helicopter transport (1968)
- Pioneers in coronary balloon angiography (1980)
- First ceramic hip replacement in the US (1982)
- First implantable defibrillator in Cincinnati (1987)
- First MRI-compatible pacemaker in Cincinnati (2008)
- First eICU in Cincinnati (2008)
- First heart valve replacement without open heart surgery in Cincinnati (2011)



Christ Hospital's first research center was established in 1927 after a \$100,000 grant from the Gamble family

The Carl and Edyth Lindner Research Center at Christ Hospital

- Nationally recognized for cardiology, infectious disease, geriatric, oncology, personalized and genomic medicine research
- More than 130 active clinical trials (more than 1200 clinical research trials in total)
 - Cell therapy, gene therapy, dementia, diabetes, hypertension, lipids, ACS, CHF, heart rhythm disorders, heart surgery, heart valve disease, CAD, orthopedics, PAD, pulmonary HTN, women's health, ...
- More than 50 publications annually

The Christ Hospital Internal Medicine Residency



The Internal Medicine Residency was founded in 1976

Many attendings and faculty members are residency graduates.

At any time, there are roughly 37 internal medicine residents (currently 36)

- 9 categorical interns
- 10 preliminary interns
- 18 senior residents

Residency outcomes



TCH internal medicine residency program

Leadership

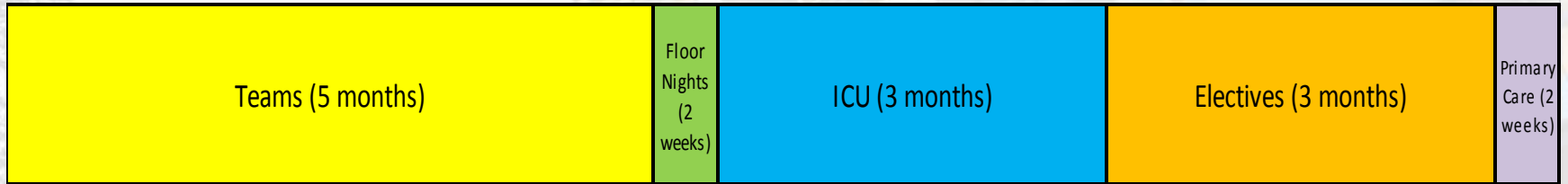
- Director of Comprehensive Medicine Service Line: Rajan Lakhia, DO
- DIO: John Schroder, MD
- Program Director: Phil Weisfelder, MD
- Program Administrator: Tena Toft
- Associate Program Directors: Kalpan Desai and Ken Heberling MD

Core faculty and clinical instructors

- Debbie Gerdes, MD
- John Hergenrother, MD
- Nate Hudson, MD
- Thomas Lamarre, MD
- Stephen Mueller, MD
- Martha Orabella, MD
- Eric Weinstein, MD

Intern rotation breakdown

RI Categorical

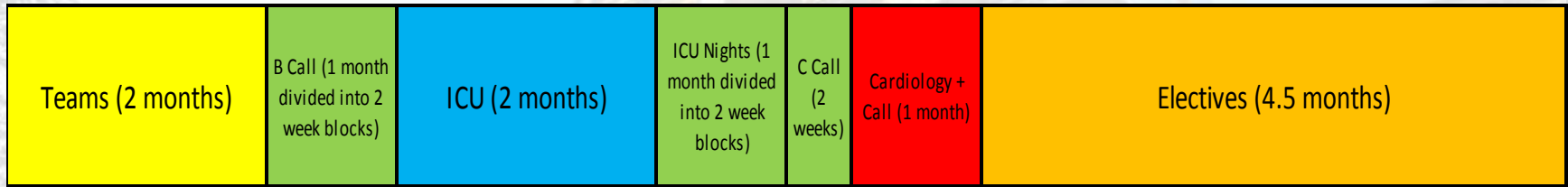


R1 Preliminary



Resident rotation breakdown (we strive for flexibility)

R2



R3



Elective choices (we have tons)

Medical Subspecialties

- Allergy/immunology
- Alternative/integrative medicine
- Away-elective
- Cardiology
- Custom elective
- Endocrinology
- Gastroenterology
- Geriatrics
- Hematology/oncology
- Hospice/palliative care
- Hospitalist medicine
- Infectious disease
- International medicine

• Nephrology

- Primary care
- Pulmonology
- Research
- Rheumatology

Specialties

- Addiction medicine
- Anesthesia
- Dermatology
- ENT
- Emergency medicine
- Medical informatics
- Neurology
- Nutrition

• Occupational medicine

- Ophthalmology
- Orthopedic surgery (non-operative)
- PM&R
- Podiatry (non-operative)
- Psychiatry
- Radiology
- Sports medicine
- Urology (non-operative)
- Women's health



ICU

- “Service Model,” i.e., most medical patients are covered by residents (limited by caps and duty hours)
- Team-based rounding (residents, intensivists, nurses, pharmacists, chaplain)
- Rounds serve both clinical and teaching purposes

Call is every 5 days

May admit patients every day

Current Team Structure: Wards

Wards

- Not a “service model.” The majority of hospitalized medical patients are admitted without residents
- The team attending may not be your patients’ attending. You may have patients with multiple attendings
- **A lot of direct intern to attending contact**
- Rounding may be in a classroom or at the bedside (based on team and attending preferences)
- The goal is for residents to see interesting cases and a wide variety of pathology.

Team A: medical specialist attending

Team C: hospitalist

Team B: accountable care unit/hospitalist

- Team B does patient-centered, team-based rounding, in a single accountable care unit (SIBR: structured intradisciplinary bedside rounding)
- Team B interns pre-round in the morning then staff the patients with the senior resident and one attending

2017-2018 Resident Weekday Schedule

6:45-7:00	Checkout with night float
7:00-7:30	Morning report
7:30-10:00	Patient care
10:00-11:00	Team A and C teaching rounds Team B SIBR followed by teaching
11:00-12:00	Patient care
12:00-1:00	Noon conference
1:00-5:00	Clinic or patient care
4:00-5:00	Checkout with on-call resident

Call is every 4-5 days on wards for teams A and C

Conferences, didactics, and courses

- AM/PM report (Tuesdays through Friday)
- Grand Rounds (monthly)
- Noon conference (daily)
- John Hopkins ambulatory modules (formal outpatient curriculum)
- ACP board review series
- Mayo clinic board review series
- Personalized study plans, directed reading plan

Categorical resident scholarly activity

R1

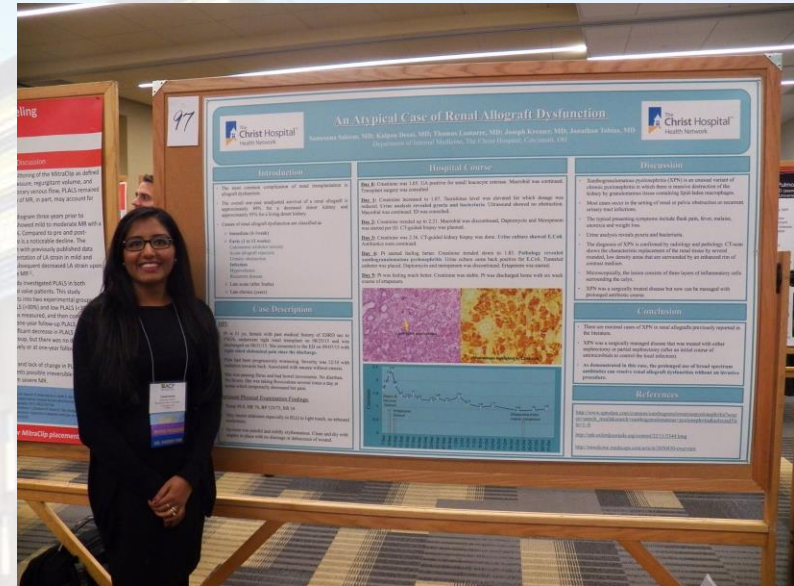
- Case Reports: ACP- Ohio
- Morning Report Presentations

R2

- Quality improvement project
- Journal club presentation
- Patient management presentation

R3

- Quality improvement project (continuation from R2)
- Patient safety presentation
- Root cause analysis



Residency sponsored wellness and social activities

- Wellness group
- Wellness sponsored activities: meetings, workshops, resident sports teams, parties, birthday recognition, resident/faculty football outing and family picnic, ...
- Orientation events and team-building outing, ...
- Recruiting events: Metropolitan Club dinners, Cincinnati Reds game, ...
- Holiday potluck dinner
- Senior retreat
- Graduation



TCH IM residency program

Regarding recruiting events and communication...

- Recruiting events are optional. We would love to see you, but attending will not affect either your chance of being ranked or your match position. Everyone is invited.
- Everyone loves thank you notes, follow up emails, and phone calls. However, to avoid ethical Match concerns we purposefully limit post-interview communications.

Questions?



We want you!