



MCEP Residency Spotlight: Genesys Regional Medical Center

www.mcep.org

Quick Facts

Location
Grand Blanc, MI

Length/Type
4 years

Training Site
Community

ED Volume
>65,000

Shift Length
9

Shifts per Month
18-19

Elective Weeks
12

Critical Care
12

Ask the Program Director: Dr. Alan Janssen

What is your programs philosophy?

To provide a balanced educational experience that encompasses medical knowledge, captures important professional values, and develops things such as resident wellness in order to establish a strong foundation for the rest of your career. We also incorporate a professional development series that focuses on things such as financial success and wellness in order to establish the foundation for success.

What sets your Emergency Medicine Residency program apart from others?

Even though a lot of D.O. programs are in the transition, we achieved dual accreditation over 10 years ago. We saw the benefits of expanding our horizons early on, so we've been following two accreditation standards for more than 10 years. We are only one of six programs in the country that did that and believe it has made a difference in the quality and type of physician we are turning out.

What type of population does your base hospital serve?

We are in kind of a suburban area in Grand Blanc but also get some rural type cases and injuries. We are also located between 23 and 75 so we also see a lot of trauma from MVCs. We see middle upper-class patients in general, but certainly not exclusively. We see a pretty high acuity with around 24% admit rate despite a good primary care base. This might be because they have already failed outpatient therapy by the time they see us.

Does your program provide research opportunities? Is research required?

We do require research. We think that understanding research builds a good foundation for your career where you will be reading articles and changing practice based on current trends. One of our core faculty oversees research for the residents and works with the hospital research director as well so there is a lot of support for resident both within the department and from the hospital's research department.

Where are your graduates? Academic vs community hospitals, geographic areas?

We have had the program since 1993, so all over the country. The vast majority end up practicing in community setting hospitals, although some end up at academic institutions as well.

What is your advice for students who are considering Emergency Medicine?

Whether thinking about what specialty you might want to be in or what type of Emergency Medicine program to choose, you have to spend time in it. See if you mesh with the "personality of the specialty." The same goes for residency programs. Spend a weekend if you can't get a rotation. Spend time with the residents. Do your homework and spend the time there. We put a lot more weight into somebody we've spent a day with, and who has been able to get a feel for how we teach and how we communicate. It's definitely better to spend personal time with the program rather than just within the structure of interview.

What part of a medical students application do you consider most important?

We have cutoffs for board scores but the most important thing after that are letters of recommendation! Also, SLOEs are the only letters I really put any weight into. Having another ER physician evaluate you means more than anything else and SLOEs also give us an idea of how they grade and evaluate within their own program.

What is something that sets a great applicant apart?

It makes a difference if they've had personal experience in the field. Something that tells us that they really know what the specialty is about rather than just a superficial understanding of it. I can teach emergency medicine as long as you've got the background, but I can't make you like it.

What do you look for when an applicant comes to interview?

Personality! I've got to see that they have energy and passion for the specialty. I also like when they ask unique questions and not just the standard interview questions. I can see that they've prepared and have put in their passion.

Ask the Residents: Dr. Dane Caputo

What made you choose Emergency Medicine?

I chose EM because you get to do a little bit of everything. After doing several rotations during my 3rd year of medical school, I began to realize that I did not like outpatient medicine, but I enjoyed the acutely sick patients and diagnosing/treating them. I liked the procedures of my surgery rotation, but did not like the OR or the lifestyle of the surgery residents/surgeons. I enjoyed inpatient medicine, but did not like the long hours of rounding or writing extensive H&Ps. I liked having pediatric and pregnant patients, but did not want to work solely with either population.

The main conclusion I came to was Emergency Medicine, which allows me the opportunity to work with a wide variety of patients with an even wider variety of chief complaints and medical problems.

What is your 'typical' day like as a resident?

A "typical" day, while in the Emergency Department, would consist of a 9 hour shift. During the shift you see patients and discuss them with your attending, the more senior you become the more patients you will see and the more independent you will become, although the attending is always there and always sees your patients. You will see a wide variety of complaints, perform common procedures (intubation, chest tubes, trauma and medical resuscitations, etc.) along with seeing patients with chest pain, abdominal pain, earaches, sore throats, etc. We document with Dragon in the electronic health record and are responsible for our own notes, which are co-signed by your attending. We also work 1-on-1 with the attending that has a shift to match our shift.

After the shift, typically spend some time (30 minutes or more) doing some kind of studying, whether that is listening to EM:RAP, Hippo EM, or reading from Rosen or some other text.

Occasionally you will need to do some administrative type work like patient logs, duty hour logging, etc., but otherwise the rest of the hours are free time. While in the department you are never on call and once you leave the hospital, you don't bring any work home with you.

Why did you choose the program that you currently attend?

I chose Genesys Regional Medical Center mainly for the cohesiveness of the residents. When I auditioned with the program I could tell how happy the residents seemed to be and that they all seemed to work well with each other.

Do you live in the city your program is in? What do you like about the area?

I live approximately 15 minutes from Grand Blanc in the city of Fenton. The immediate area surrounding the hospital offers several restaurants, a small downtown area, and a large movie theater. Where I live in Fenton, there are tons of great restaurants/bars and a downtown area where many of the residents go to hang out and have an occasional meal/drink. More info can be found on our website www.genesyssem.com.

What is your call/shift schedule like?

We work 9 hour shifts. You will work 19 shifts a month as a PGY-1 and 2, then 18 shifts as a PGY 3 and 4. The opener shift and overnight shift are reserved for PGY 3 and 4 residents, but you do plenty of morning and late-night shifts as a PGY 1 and 2. There is no call schedule while in the ED. The first-year residents work about 10 (give or take) house call shifts which are distributed evenly amongst all the incoming PGY-1s from all programs in the hospital. Otherwise there is no call.

What activities are you involved in outside of the program?

Outside of the program I am an ACLS instructor and I moonlight at a free-standing ED in Saginaw. I am on several committees in the hospital as well including Graduate Medical Education Committee and the Medical Education Accreditation Committee.

What is your advice for students who are considering Emergency Medicine?

EM is become more and more competitive each year, make sure you are doing the best you can on the boards and in class. Try your best to audition at the hospitals you are highly considering, make sure you like the facility and the way the program is managed. Take a look at the residents and assess their level of happiness, this says a lot about the program.

How did you decide which programs to apply to?

I set multiple criteria with a descending order of importance to me. My most important criteria were as follows: location, shift length (I personally did not want to work 12 hour shifts), hospital volume (at least 50,000 or greater), resident happiness and cohesiveness, education/didactics.

What type of setting do you plan on practicing in the future?

Suburban, anywhere from 60-110,000 visits annually. Preferably Level II or I trauma center. I would like to work with residents if applicable. I plan on practicing in Arizona when finished with my residency.

What is something you wish you had known when applying to residencies?

To trust in the system and that everything will be okay. Sounds odd, but the Match and everything involved with it is very stressful. As long as you are somewhat competitive on paper, can have a causal conversation with people (i.e. during the interviews which are typically pretty laid back), and you can match your personality with the personality of a program you will be just fine.

Ask the Residents: Dr. Emily Hammer

What made you choose Emergency Medicine?

The shift work, each day is different, the spontaneity of the job, I get to treat a lot of different medical problems.

What is your 'typical' day like as a resident?

There isn't a typical day ☺

Why did you choose the program that you currently attend?

The greater Flint area works with several different populations. Our facility is a community hospital with large volumes. I get to treat a variety of conditions, and have one-on-one attending coverage. Our attendings care about our education and want to help up be the best ED doctor possible. Also, our residency is like a big family. We are all great friends and help each other at the drop of the hat.

What is your call/shift schedule like?

19 – 9 hour shifts per month as a junior resident (1st and 2nd year) and 18 -9 hour shifts per month as a senior resident (3rd and 4rd year). Of the 18 shifts of the seniors, one of the shifts is an urgent care shift in our ED. No call!

Do you live in the city your program is in? What do you like about the area?

I live in Grand Blanc. It is a nice and safe community. There are great schools in the city. I like that the area has a lot of outdoor activities like mountain biking, lakes, walking paths, and parks.

What activities are you involved in outside of the program?

I am involved in the hospital's Sim Lab. Our facility has a large sim lab that provides great opportunities to learn procedures and do mock cases. I am also involved in a soccer league associated with our hospital.

What is your advice for students who are considering Emergency Medicine?

Shadow and spend some time in the emergency department in your 3rd year. My school did not offer ER electives until 4th year, so I used my free time in 3rd year to shadow and see if ER was really for me.

How did you decide which programs to apply to?

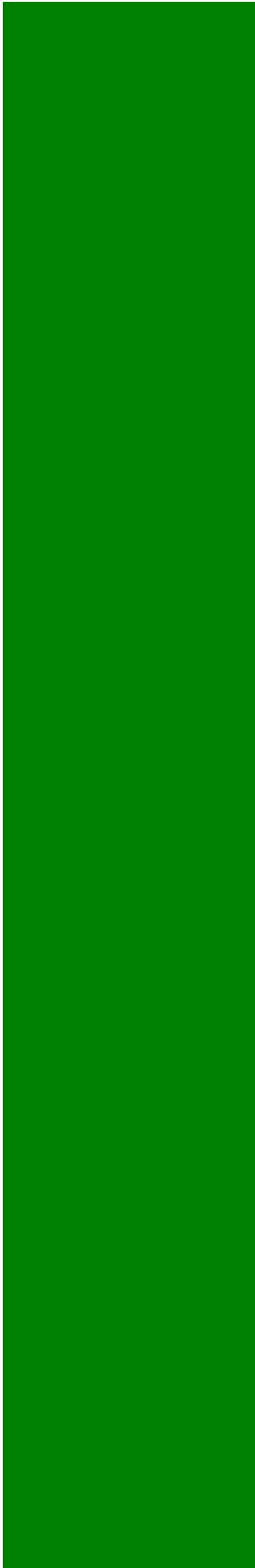
I was raised in Michigan, so I know I wanted to stay in the Midwest. I applied to all Michigan ER residencies and also those in the Midwest. Apply to many; ER is competitive!

What is something you wish you had known when applying to residencies?

I wish I had known to rotate at more ED residencies as a student. Our school only let us do 2, so I wish I would have spent more time looking at all the different programs prior to interviews.

What type of setting do you plan on practicing in the future?

I will be employed at a large community hospital



For more information on Genesys Regional Medical Center Residency, please go to
<http://www.genesys.org/EM>
Program Information provided via the EMRA Match tool
<https://webapps.acep.org/match#/>

Thank you Dr. Janssen, Dr. Caputo, and Dr. Hammer for taking the time to complete our MCEP
Spotlight!