Medical Student Rotation – MCV Orthopaedics

Welcome to the Department of Orthopaedics at MCV. We are very excited to have you join us for your rotation.

Whether you are interested in orthopaedics, emergency medicine or just want to get a glimpse of what orthopaedics is all about, you’re in the right place.

You can make as much out of this rotation as you’d like, but there are a few requirements:

Call

If you are doing a subI, and are on rotation for four weeks, you should take at least two calls (Friday night, Saturday or Sunday day). Talk to the other students on rotation in the first few days and arrange a schedule that works for you.

Also, if you’re done early during a weekday, it’s a good idea to page the resident covering the emergency room (p9910) to see if they need help with consults. If there’s more than one student on at a time, you can rotate this.

Conferences

Monday, 6:45-7:30 a.m. — Fracture conference (West Hospital, ninth floor)
  • Discuss all cases that came in that weekend

Tuesday, 5-6 p.m. — Basic Science (West Hospital, ninth floor)
  • Orthopaedics basic science course for first and second year residents lead by Dr. Domson

  • Talk to the residents about what topic will be discussed, and be prepared… there’s a quiz every week

Thursday, 7-8 a.m. — Fracture Conference (West Hospital)/ Tumor Conference (Gateway 6)
  • A resident will prepare a chapter out of “Rockwood and Green’s Fractures in Adults.”
  • Conference with the Department of Pathology discussing interesting tumor cases

Friday, 7-10 a.m. — Didactics
  • Varies on a monthly basis, but basically we go over general topics in orthopaedic, with occasional journal clubs, complications or other things that come up.
Overall, it is your responsibility to find out what you need to read for conferences and where to show up.

**Services**

If you’re a fourth year wanting to go into orthopaedic, we suggest you rotate on four different orthopaedic services in either joints, tumor, trauma, hand/foot, sports, shoulder/elbow or peds.

Pick one a week, and if there’s not much going on during your service for a day, then join another or help in general clinic. Try and work with as many attendings and residents as you can. Help out with rounding in the mornings — the busiest services in terms of rounding are trauma and joints.

If you’re going into ER, we’d suggest you spend one week on night float. It’s a good time to get down to the ER and see acute orthopaedic consults (e.g., shoulder/wrist/hip reductions, open fractures, and just basic orthopaedic stuff).

As a third year, just talk to one of the residents about what you want to get out of your rotation, and we’ll come up with a plan.

Here’s a basic weekly schedule of teams in the operating room and clinic

**Monday**
Main OR: joints, shoulder/elbow, trauma
ACC: hand/foot, sports
General clinic

**Tuesday**
Main OR: tumor, joints, foot/ankle, sports
ACC: hand/foot
Clinics: general (Dr. Foster), trauma

**Wednesday**
Main OR: tumor, shoulder/elbow, joints, trauma
ACC: hand/foot, sports
Clinics: general, hand

**Thursday**
Main OR: joints, tumor, hand/foot, peds
ACC: hand/foot
Clinics: trauma

**Friday**
Mostly general clinic, tumor clinic
Some trauma and sports in OR
A quick note on general clinic: It is a chief resident-run clinic, with supervision from attending Dr. Sellergren. The way it works is that you go and see a patient, present the patient to the chief/upper lever resident or to Dr. Sellergren. It is a good way of getting experience in a good orthopaedic exam and doing injections.

On your first day, plan on attending the fracture conference at 6:45 a.m. in West Hospital, ninth floor and can go over some of this stuff if you have questions.

**Important Numbers**

Orthopaedic Intern: p9920    Orthopaedic consult resident: p9910