DATE: April 1, 2016
TO: Class of 2017
SUBJECT: ENROLLMENT OPEN

FOURTH YEAR ELECTIVE IN MEXICO – CSGH 408

This is to invite your interest and participation in the elective clerkship in Hermosillo, Mexico, in conjunction with the Medical School at the University of Sonora. Clinical rotations will occur at Hospital Infantil del Estado de Sonora (HIES) and adjacent Women’s hospital, and the General Hospital. The elective is sponsored by Loyola faculty, Ramon Durazo Arvizu, PhD, professor of epidemiology and preventive medicine. On-site faculty elective supervisors are: 1) Dr. Maria de los Angeles Durazo Arvizu, attending physician in the department of Pediatrics and Infectious Disease, 2) Dr. Francisco Octavio Durazo Arvizu, attending physician in the department of Gynecology and Urology and 3) Dr. Geraldo Alvares, Director of Epidemiology and Public Health. This 4th year elective is for those students who are proficient Spanish speakers seeking a training experience at a medical school internationally. A particular interest in Public Health, Women’s Health, Pediatrics and Infectious Disease is also essential.

Course Description

Location:
On-site Supervisors:
1) Dr. Maria de los Angeles Durazo Arvizu, attending physician in the department of Pediatrics and Infectious Disease,
2) Dr. Francisco Octavio Durazo Arvizu, attending physician in the department of Gynecology and Urology and
3) Dr. Geraldo Alvares, Director of Epidemiology and Public Health.

Students will spend the majority of the time in the inpatient setting at Hospital Infantil del Estado de Sonora (HIES) and adjacent Women’s hospital. Patient population ranges from those living in the city of Hermosillo to individuals from surrounding rural areas. This is the only Pediatric hospital in the entire state – so any complicated cases from the region get sent here, as for the nearby General Hospital and Women’s hospital. The HIES is a teaching hospital, so there are residents, interns, and medical students of various levels. Classwork (including Spanish language class) is available at the nearby medical school. Hospital physicians will include visiting students in all aspects of care (morning rounds, procedures, lectures, trainings, etc).

Hermosillo has a developed medical system that also includes specialist and subspecialist care. Students must design their rotation and have it reviewed by the Center for
Community and Global Health Director of Education prior to approval. Rotations can include week-long blocks from the following:

1) Obstetrics and Gynecology  
   a. Labor and Delivery - 2010 report: avg of 25 births seen a day by students  
   b. Gynecologic surgeries - students assist  

2) Pediatrics  
   a. Inpatient admissions  
   b. Hematology-Onology Service  
   c. Neonatology  
   d. Peds ER  

3) Infectious Disease  
   a. Inpatient rounds  
   b. Outpatient clinic  
   c. Lectures and grand rounds with residents  

Other sub-specialties and opportunities include: ophthalmology, urology, hematology oncology, epidemiology, public health, microbiology. See Appendix 1 for an example of patient cases on this elective.

**Evaluation Method**  
Students will have their final evaluation completed by Dr. Maria de los Angeles who will be advised on performance by the other faculty during the rotation. Dr. de los Angeles will also complete the mid-rotation feedback.

All students will receive their final grade from the Director of the Center for Community and Global Health based on site-supervisor evaluation and post-rotation requirements (reflection, evaluation and patient log).

**Learning Expectation and Educational Goals and Objectives**  
Students will be expected to fulfill the role of a senior student in the medical education system at the hospital and clinic settings in Hermosillo.

See Appendix 2 for Educational Goals and Objectives

**Who May Apply**  
Fourth year students in good standing are eligible to enroll. Successful completion of a subinternship experience prior to going to Hermosillo is recommended but not required. The ability to speak Spanish fluently is required because there are no translators for English in the hospital setting.

**Funding, Travel, Lodging**
Funding: A limited number of positions and funding are available and will be considered on an “as available” basis. Loyola will offset up to $500 to cover travel and living expenses.

Travel: Travel to Hermosillo will be facilitated through Dr. Durazo’s family. It takes place through the following arrangements:

i. Flight from Chicago to Tucson, Arizona
ii. Board a direct bus from Tucson airport to Hermosillo, where students will be received by Dr. Durazo’s family at the bus station
iii. Returning to Chicago will include a bus from Hermosillo to Tucson International airport.
iv. Return flight from Tucson to Chicago

Within Hermosillo, students are able to walk to and from lodging and medical school campus/hospital site.

Lodging: Currently housing is provided through Dr. Durazo’s family. Public transportation throughout the city by bus is also affordable and reliable.

How to Apply

1) Applicants should complete all required International Elective Forms (Emergency information form, Conditions of participation in International Clinical Electives form, Acknowledgement of Risks and Release of Responsibility form). The completed application and supporting forms should be submitted to Lucia Garcia in CCGH.

2) Please enter at least two preferences of date one month in length. Up to four students typically can be accommodated each month, but numbers will be firmed up in advance to insure they can support the number of students seeking any particular month.

3) Applicants should complete the Center for Community and Global Health application form found in myLUMEN under “Elective Registration.”

4) Include any comments or questions about your dates or participation that you wish us to be aware of when reviewing your application.

Deadlines
We ask that you apply as soon as possible, preferably before July 1, 2014 in order to secure your slot in this elective. After that date, applications will be considered based on remaining space and available funding. A firm deadline of December 1, 2014 has been set for all spring 2015 international elective rotations.

Questions?
If you wish to discuss this option further before applying, do not hesitate to make an appointment to see Dr. Amy Blair or Lucia Garcia.
Appendix 1 – Sample Log (Typical cases and activities on elective)

<table>
<thead>
<tr>
<th>Clinical/Didactic Activities – Hermosillo, Mexico</th>
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</thead>
<tbody>
<tr>
<td><strong>Clinic:</strong></td>
</tr>
<tr>
<td>- Peds ID rounds (whooping cough, RSV bronchiolitis, meningitis, pneumonia, brain abscess, leukemia, HIV, Wolf Hirschhorn)</td>
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<tr>
<td>- phlebotomy/lab collection rounds</td>
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<tr>
<td>- individual learning time</td>
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<tr>
<td>- outpatient pediatrics (allergic rhinitis, well child, HA, f/u reactive thrombocytosis)</td>
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<tr>
<td><strong>Didactic:</strong></td>
</tr>
<tr>
<td>- attended public health class with following 2 debates:</td>
</tr>
<tr>
<td>1. Should we pay disadvantaged individuals so that they take care of their own health?</td>
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<tr>
<td>2. Health reform should on physical activity versus obesity.</td>
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<tr>
<td>- attended local high school basketball game (our brother played)</td>
</tr>
<tr>
<td>- made tortillas with family</td>
</tr>
<tr>
<td><strong>Clinic:</strong></td>
</tr>
<tr>
<td>- Peds emergency room for rounds and talking with patients (febrile seizures, tetralogy of fallot, toxoplasmosis with intracranial calcifications, intestinal obstruction vs malrotation, hemolytic uremic syndrome, whooping cough, TBI, toxic ingestion, pneumonia)</td>
</tr>
<tr>
<td>- outpatient pediatrics (neck cyst, constipation, hospital discharge f/u for bronchiolitis, facial wound with pathology positive for TB, gynecomastia)</td>
</tr>
<tr>
<td>- ON CALL: labor and delivery with pediatric team: 5 deliveries (2 c-sections, 3 vaginal)</td>
</tr>
<tr>
<td>* 1 set of twins born at 28 weeks, both intubated (we helped with providing respiratory support), also observed central line placement in one twin via umbilical vein</td>
</tr>
<tr>
<td><strong>Clinic:</strong></td>
</tr>
<tr>
<td>- Peds ID rounds: (periorbital cellulitis/maxillary abscess, meningitis with abscess, pneumonia, bronchiolitis x 3, leukemia with neutropenic fever, asthma, whooping cough, encephalitis, HIV/TB r/o, impetigo with neck abscess)</td>
</tr>
<tr>
<td>- outpatient pediatric allergist (skin testing x 2, allergic rhinitis, sinusitis x 2, atopy, eczema, asthma x 2, UTI)</td>
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<tr>
<td><strong>Clinic:</strong></td>
</tr>
<tr>
<td>- Morning lecture (like grand rounds): Garantía de calidad en los servicios de salud</td>
</tr>
<tr>
<td>- Cardiology clinic with Dra. Sosa (Patent foramen ovale, hemangioma, physiologic murmur, hypereosinophilia, S3 gallop)</td>
</tr>
<tr>
<td>- In-house consults with Dra. Sosa (Fungemia, HUS)</td>
</tr>
<tr>
<td><strong>Didactic</strong></td>
</tr>
</tbody>
</table>
- Attended epidemiology lecture at the medical school with Dr. Alvarez (lectured about cohort studies)
- Met with Ronaldo, one of the students from Monday’s public health class to practice Spanish/English conversation

**Clinic**
- Peds ID rounds (coccidiomycosis, maxillary abscess, drained cerebral abscess, bronchiolitis x 3, PNA x 3, leukemia with neutropenic fever, asthma, malnutrition, heart murmur, asthma vs. TB, impetigo)
- Allergy clinic with Dr. Huerta (skin test x 4, asthma x 2, sinusitis, post-nasal drip x 2, ethmoid sinusitis, hyper IgE, allergic rhinitis, impetigo, allergy to house mite/cockroach)

**Clinic**
- Labor and delivery, working with pediatricians (3 vaginal deliveries)
- Reviewed newborn exam
- Took 2 triage histories from moms
- Saw one baby with hypoglycemia

**Clinic**
- Labor and delivery, working with pediatricians (saw 10 deliveries total; 6 vaginal and 4 c-sections: 1 twins, 1 pre-eclampsia)
- Took histories
- Independently did newborn exams (giving baby vaccines, putting in oral gastric tube, taking measurements, first physical exam)
- Saw resuscitation of 550 gram, pre-mature baby (including intubation, arterial and venous umbilical lines)

**Didactic**
- Read epidemiology paper with summary for homework

**Clinic**
- Labor and delivery, working with Peds (6 vaginal deliveries, 3 c-sections)
- 1 baby with ichthyosis lamellar

**Didactic**
- Graduate school epidemiology class (cohort studies)
- Language conversation practice with medical students

**Clinic**
- Labor and delivery, working with Peds (8 vaginal deliveries, 4 c-sections)
- 29 week only neonate with C-PAP
- Scrubbed in to catch babies from gynecology

**Clinic**
- Labor and Delivery, working with Peds (3 C-sections; 4 vaginal deliveries)
- Again scrubbed and caught newborn from gyne team and then completed newborn physical exam

**Didactic**
- Public health class at medical school
| Clinic | First day working with OB/Gyne  
|        | Limited responsibility, only able to place record fetal heart tones  
|        | Observed 3 vaginal deliveries, 1 urogyne operation  

| Clinic | Worked on L&D with Peds residents (3 C/S, 4 vaginal deliveries)  
|        | 34 week twins  
|        | Baby with galactorrhea  

| Didactic | Worked on our presentation for tomorrow’s epidemiology class  

| Clinic | Hospital lecture in morning  
|        | Worked on L&D with Peds residents  
|        | 6 c-sections/ 4 vaginal deliveries  
|        | Saw babies with: Meningiocele, hydrocephalus, macrosomia, polydactyl  

| Didactic | Epidemiology class: gave presentations on cohort studies  
|         | Charla with medical students (Spanish/English language exchange)  

| Clinic | Worked on L&D with Peds residents  
|        | 5 vaginal deliveries (revised newborns and completed physical exam)  

| Clinic | Peds ID rounds (pneumonia x 4, bronchiolitis x 3, whooping cough x 2, possible tuberculosis, impetigo/complicated varicella, r/o bronchodyplasia, congenital heart defect, epididymitis, HIV)  
|        | Allergy consults (sinusitis x 4, skin testing x 4, asthma x 2, post-nasal drip, allergic rhinitis x 3, hypertrophic adenoids)  
|        | Read in library (articles for class tonight)  

| Didactic | Public health class at medical school about teen pregnancy and needle exchange programs  

| Clinic | Hospital lecture in morning about child abdominal trauma  
|        | Rheumatology clinic (hyperlaxitude, JRA x 2, systemic arthritis, arthralgia, Marfan’s)  
|        | Allergy consults (skin testing, allergic rhinitis)  

| Clinic | Endocrine clinic (autoimmune hypothyroidism, diabetes insipidus, VP shunt, hamartoma, questionable Asperger’s, bifid uvula, phimosis, short stature x 2, acanthosis, micrognathia, high arching palate, reviewed Tanner stage, |
hyperglycemia/ MODY, congenital hypothyroidism, heart murmur, seizure
disorder, nystagmus, Grave’s dx, precocious puberty)

**Clinic**
- Morning lecture – Nutrition
- Peds ID rounds (TB, possible rickettsia, conjunctivitis, PNA (x2), coque,
  asthma/bronchospasm, malnutrition, nosocomial PNA, pertussis, pulmonary
  fibrosis/dysplasia, aspiration PNA, and complicated varicella)
- Oncology rounds (neuroblastoma (x2), AML (x2), ALL, medulloblastoma,
  Ewing sarcoma (x2)

**Didactic**
- Epidemiology class with Dr. Alvarez

**Appendix 2**

**Educational Goals and Objectives**

**Goal 1: Medical Knowledge**

<table>
<thead>
<tr>
<th>Specific Outcome</th>
<th>How to measure the outcome</th>
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</thead>
<tbody>
<tr>
<td>To gain better clinical knowledge in the area of obstetrics, as well as understand how cultural beliefs play a role in prenatal care and labor and delivery in Mexico (use of doulas, midwives, etc).</td>
<td>Students will keep log of all the deliveries including such details as complications with appropriate interventions, fetal heart tracings, and individual patient beliefs concerning labor and delivery.</td>
</tr>
<tr>
<td>To become more comfortable when prescribing antibiotics and acquire a better clinical discernment of the best antibiotic for at specific illness.</td>
<td>Students will attend infectious disease lectures at the medical school. We will also work with an infectious disease specialist for one on one questions and answer sessions.</td>
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**Goal 2: Interpersonal and Communication Skills**

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<tbody>
<tr>
<td>To increase Spanish proficiency in both daily language and medical vocabulary.</td>
<td>Students will attend Spanish classes at the university and get feedback from our teachers, supervisors, and our host family regarding the improvement in our language skills.</td>
</tr>
<tr>
<td>To improve in medical note writing and become comfortable at writing medical progress notes in Spanish.</td>
<td>Students will choose one note a week about which we receive specific feedback from our attendings.</td>
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</table>

**Goal 3: Professionalism, Moral Reasoning, and Ethical Judgment**

<table>
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<tbody>
<tr>
<td>To be an effective member of the health care team, even as a guest from a different country.</td>
<td>Students will gage how well we are able to complete tasks dictated by our team and encourage frequent feedback from the residents and attendings.</td>
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<tr>
<td>To understand the ethical dilemmas of health care</td>
<td>Students will observe and engage in</td>
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</table>
in Mexico.

conversation with our fellow health care workers. In addition, we will read articles in the daily news to ensure our currency with such issues.

Goal 4: Clinical Skills and Patient Care

<table>
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<tbody>
<tr>
<td>To be able to complete our physician tasks in a sensitive manner and comfort a woman who is in active labor.</td>
<td>Students will reflect on our daily interactions with patients and the medical team, as well as observe how our skills progress throughout our time in labor and delivery.</td>
</tr>
<tr>
<td>To learn more about education in the prevention of infectious diseases and become very comfortable at counseling patients on specific preventive measures.</td>
<td>Students will log preventive measures already taken by our patients (hand-washing, boiling water, etc) and counsel patients on other preventative techniques that are pertinent to Hermosillo</td>
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</tbody>
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Goal 5: Lifelong Learning, Problem Solving, and Personal Growth

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<tbody>
<tr>
<td>To understand that disease processes and epidemiology differs between Mexicans who have immigrated to the United States and Mexicans who are living in their native country. (specifically the difference in the prevalence of Diabetes and Obesity between the two groups)</td>
<td>Students will keep a log of the most prevalent diseases we encounter in Mexico and compare this data to the diseases we see in the United States.</td>
</tr>
<tr>
<td>To become more confident in our clinical skills as we experience the decreased dependence on technology in Mexico.</td>
<td>Students will discuss our assessments and plans with our attendings and make sure to understand the step wise diagnostic and therapeutic plan initiated by our medical teams</td>
</tr>
</tbody>
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Goal 6: Social and Community Context of Health Care

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</thead>
<tbody>
<tr>
<td>To evaluate the relationship between socioeconomic status and exposure to infectious disease and complications during pregnancy.</td>
<td>Students will attend public health lectures with the students at the University.</td>
</tr>
<tr>
<td>To be committed to caring for undocumented citizens in the United States and serving as advocates for those individuals who do not have a voice.</td>
<td>Students will be disciplined in following the health care reform and political agendas of our senators.</td>
</tr>
</tbody>
</table>
2016-2017
Loyola International/U.S. Service Elective

HERMOSILLO, MEXICO

Students applying for the Hermosillo, Mexico elective must complete the following paperwork to receive academic credit and partial financial underwriting for the rotation.

- Center for Community and Global Health (CCGH) application for international elective found in elective registration (application must be reviewed and approved by Dr. Amy Blair in CCGH)
- Emergency Information Form
- Conditions of Participation in International Clinical Electives Form
- Acknowledgement of risks and Release of Responsibility Form
- Submit proof of health/hospitalization insurance coverage (copy of insurance card)
- Submit proof of medical evacuation and repatriation insurance coverage (copy of CISI insurance card)
- Proof of immunizations that are required for all externships
- Evaluation: If selected to participate in the elective the student will be responsible for picking up grade sheet from Lucia Garcia in CCGH before leaving for the rotation. The Student will hand deliver the evaluation to site director for grading.

Refer to
http://hsd.luc.edu/global_health/electiveopportunities/international4thyearelective/ for links to paperwork and more information. Feel free to contact Dr. Amy Blair (ablair1@lumc.edu) or Lucia Garcia (lucgarcia@luc.edu) if you have any questions or need additional information.

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