

Internal Medicine/Psychiatry Combined Program Curriculum Checklist

Curriculum Checklist for _____

Program start date: _____

Program End date _____

PGY 1 & 2 Schedule

Date	Medicine	Date	Psychiatry
	Medicine Service		Adult Inpatient
	Medicine Service		Adult Inpatient
	Medicine Service		Adult Inpatient
	Medicine Service		Adult Inpatient
	Medicine Service		Adult Inpatient
	Medicine Service		Neurology
	Medicine Service Night Float		Neurology
	Cardiology		Community Psych
	Ambulatory Clinic		Child Psych
	ER		Child Psych
	ICU		Consult Psych
	Selective		Consult Psych
	Selective		Night Float

PGY 3 – 5 Schedule

Date	Medicine	Date	Psychiatry
	ICU		Geriatric Psych
	ICU		Addiction Psych
	Medicine Service		Consult Psych
	Medicine Service		Consult Psych
	Medicine Service		Adult Inpatient
	Medicine Service		Psych Night Float
	Medicine Service		Elective (1/2)
	Medicine Service		Elective
	Ambulatory		Adult Outpatient
	Ambulatory		Adult Outpatient
	Medicine Night Float		Adult Outpatient
	Selective		Adult Outpatient
	Selective		Adult Outpatient
	Selective		Adult Outpatient
	Selective		Adult Outpatient
	Selective		Adult Outpatient
	Selective		Adult Outpatient
	Elective		Adult Outpatient
	Elective		Adult Outpatient
	Elective		Adult Outpatient
	Cardiology (1/2)		Adult Outpatient

<u>Medical Electives</u>
Hematology-Oncology
Emergency Medicine
Radiology
EP
Anesthesia
Dermatology
Office Gynecology
Orthopedics
Neurology
Vascular Medicine
Allergy / Immunology

<u>Medical Selectives</u> <u>(1 each req.)</u>
Pulmonology
Gastroenterology
Renal
Geriatrics
Hematology-Oncology
Infectious Diseases
Endocrine

<u>Psych Electives</u>
Consult Psych
Child Psych
Community Psych
Neurology
IP Chief Resident
Psychologic Testing
Sleep Medicine