

North East Medical Services (NEMS) Internal Medicine Residency Program Residency Rotations & Curriculum

The Internal Medicine Residency Program at North East Medical Services (NEMS) features a robust curriculum and clinical rotation offerings, including:

- **Rotations:**
 - **PGY-1:** Cardiology, GI, Neurology, Infectious Diseases, Community Medicine, Inpatient Medicine, ICU, Emergency Medicine
 - **PGY-2:** Rheumatology, Pulmonary, Endocrinology, Nephrology, Hematology-Oncology, Addiction Medicine, Community Medicine, Inpatient Medicine, ICU
 - **PGY-3:** Geriatrics, Community Medicine, Emergency Medicine/Hospice & Palliative Care, Quality Improvement, Health Systems Management, Office Gynecology, Inpatient Medicine, ICU, Board Prep
 - Residents will also have two Individualized Learning Experience (Elective) rotations each year.
- **3+1 Schedule Format:** Our program uses a 3+1 scheduling format, which allows for a greater emphasis on primary care medicine. Residents will have continuity clinic every month and build relationships with their dedicated panel of patients. During most rotations, NEMS residents will complete at least 4 half-day sessions at the continuity clinic during the +1 week. Elective rotations will have 13 continuity clinic sessions in the month and during the PGY-3 year, the residents will complete 16 continuity half-days during board prep, QI and HSM rotations. This amounts to approximately 240 half-day sessions over 30 months of training.
- **Didactic Sessions:** NEMS will use a variety of didactic components, including an academic half-day during the +1 week, grand rounds, morning report, morbidity and mortality conference, and journal club. These sessions will include traditional lecture format, virtual/recorded content, web-based content, workshops, case studies, independent study, simulations, and conferences.
- **Quality Improvement:** Throughout all three years of training and beginning early in PGY-1, residents will also be exposed to different clinical quality improvement programs in their training, such as Clinical Quality Improvement (CQI) meetings, QI projects, and other clinical performance issues within community health centers.
- **Chronic Disease Management:** Residents will have the opportunity to utilize electronic health record-generated practice performance data to evaluate the preventive health care they deliver to their panel of continuity patients, including cancer screening rates, immunization rates, and annual physicals.