Welcome to the Neonatal Intensive Care Unit (NICU) at Children’s Hospitals and Clinics of Minnesota-St. Paul.

We want to give you some idea of what to expect during your rotation. We hope you have a great rotation. It is our intent to give you a comprehensive introduction to newborn intensive care.

**Staff:**

The NICU medical staff consists of eight attending neonatologists:
- Michael Colelman, MD
- Mark Mammel, MD
- Cathie Gatto, MD
- Erik Hagen, MD
- Tom Pokora, MD
- Jill Therien, MD
- Andrea Lampland, MD
- Mark Bergeron, MD, MPH
- Neonatology Fellow

There are two to three pediatric residents, sometimes a Family Medicine resident and/or medical student, and 28 neonatal nurse practitioners. The neonatal nurse practitioners provide neonatal transport, delivery room resuscitation, and critical care management of neonates.

**Statistics and Information:**

The NICU within Children’s has 50 beds. Most of our patients are born at our Birth Center in United Hospital, or within a radius of 150 miles of the city. Our usual census is around 45 infants.

There are two patient care teams
1. Convalescent
2. ICU

An attending neonatologist and PNP/NNP comprise the convalescent team. Residents, NNPs, the fellow, and another neonatologist care for the remaining infants. At times, it may become necessary to shift patients between residents to maintain some parity; patients are also transferred from one team to another depending on their acuity. Nurse practitioners round and follow both intensive care and convalescent patients, but are responsible for all patients in the NICU. Therefore, the number of ICU patients followed by residents and NNPs may differ. We will typically cap a single resident patient load at five patients.

You will provide primary care to the patients assigned to you. This will include examining these patients each morning and presenting their problems to the attending physician on morning rounds. You will write notes and orders on these patients daily. The residents and NNPs are responsible for maintaining a narrative summary on all their patients. **The narrative summary must be complete and submitted to the attending neonatologist on the day of discharge.** The attending will approve and sign the summary.
There are no overnight call shifts during this rotation, but we do have call rooms located near the NICU and they are reserved for the NICU residents. Since you do not take overnight call, food is not supplied to you during your rotation. Residents will work five (5) weekdays and one (1) weekend day each week. Residents leave each day at 5:30 p.m., after signing-out to the on-call fellow or practitioner. On your weekend day, it is expected that you will help provide care for your fellow residents’ patients. The attending neonatologist or fellow should approve any changes in the call schedule. **It is your responsibility to arrange coverage with any absence**

The neonatal fellow will be your primary supervisor during your time in the intensive care nursery. He/she is always available to supervise procedures and provide help and information in managing your patients. The attending staff, as well as fellow, are always available during the day, at night, and on weekends. They expect to be called with any admissions or other problems that you have in the nursery. We are more likely to be upset if you do not call us, than if you do. Please do NOT be shy.

**Agenda:**

On the first day of your rotation, please arrive in the NICU workroom located on the second floor of Children’s Hospital, at **7:00 a.m.** to receive sign-outs on your patients. There will be an orientation following your sign-outs at **7:30 a.m.** in the Medical Education Library, located on the first floor of the Garden View Medical Building, Suite 103.

Attending rounds begin at **8:15 a.m.**, including weekends. Residents are expected to arrive between 7:00 and 7:30 a.m. to examine their patients, as well as review their patients’ charts prior to rounds, if possible. Patients admitted to the newborn service will be assigned to you or the nurse practitioners based on the census.

Teaching conferences are held Monday through Friday at noon in the Garden View Conference room 1053/54 on the first floor.

To supplement your clinical management skills, we provided you with a curriculum located on our group’s website: [www.newbornmed.com](http://www.newbornmed.com) under “**fellow and resident education**”. The password for this website is **meconium**. It is expected that you will read each paper during your rotation and follow the link to the post-test on the University of Minnesota Moodle site for this rotation (enrollment key: **meconium**). Please refer to the resident manual for more details.

We look forward to working with you. We expect you will learn a great deal of neonatology and also have a good time. If questions arise, please contact our neonatal medicine department secretary, Marietta Pitzele, at 651-220-6260 or e-mail her at Marietta.pitzele@childrensmn.org