

Curriculum Overview

Our program provides broad exposure to a diversity of patient populations and clinical settings to maximize learning and training of our residents.

Our graduates report feeling very well-prepared for the next step of their careers. We offer many opportunities for residents to individualize their training to meet their specific career goals.

In addition to a robust selection of clinical rotations, our residents participate in multiple organized learning sessions to enhance their education and ensure strong preparation for the pediatric board exam. Finally, we reinforce the importance of each pediatrician's engagement in his or her community through comprehensive training in advocacy.

Our Locations

Brenner Children's Hospital

Brenner Children's Emergency Department - Wake Forest Baptist Health

Brenner Children's Hospital is a 144-bed "hospital within a hospital" founded in 1986. This \$132 million facility is the only children's hospital in northwest North Carolina. The pediatric emergency department (including the Childress Institute for Pediatric Trauma) became the first Level 1 pediatric trauma center in the state in 2011 and is one of only 51 centers in the country. The inpatient pediatric ward comprises five floors of Brenner Children's Hospital and includes pediatric and neonatal intensive care units plus the Wake Forest Birth Center, which opened in 2019. The Birth Center was recently voted one of America's Best Maternity Hospitals for 2022 by Newsweek. More than 3,600 children are admitted to Brenner Children's Hospital each year, and more than 28,000 pediatric subspecialty visits occur annually at the hospital-based outpatient clinics.

Downtown Health Plaza

Downtown Health Plaza - Wake Forest Baptist Health

The Downtown Health Plaza (DHP) is the largest primary care outpatient department in the Atrium Health Wake Forest Baptist system and the home of our resident continuity clinics. This multidisciplinary clinic, including Internal Medicine and Obstetrics and Gynecology in addition to Pediatrics, is strategically located in a healthcare manpower shortage area and has a unique attachment to the underserved east Winston-Salem community. It is certified as a level 3 patient-centered medical home by the National Committee for Quality Assurance, meaning that our residents are taught a model of care placing patients at the forefront. Radiology, lab and pharmacy are located on-site. Patients are screened for the social determinants of health at every visit, and we have an onsite Food Pharmacy, as well as funds to support transportation and other basic needs for our patients. Close partnerships exist with many community resources, and several are co-located within the DHP. The DHP is the primary outpatient teaching site for the residency program.

Rotation Overview

Inpatient Wards

Our inpatient pediatric ward comprises three floors of Brenner Children's Hospital.

While on service, residents are exposed to both general pediatrics and subspecialty patients, including cardiology, nephrology, rheumatology, gastroenterology, pulmonology, infectious diseases, neurology, hematology/oncology, and endocrinology.

Additionally, we assist the various surgical specialties (ENT, Neurosurgery, Orthopedics, Ophthalmology, Urology, and Pediatric Surgery) in the care of admitted patients.

We have three wards' teams – one inpatient subspecialty team, and two general pediatrics teams. The subspecialty team is comprised of a second and a third-year resident and our general pediatrics teams are comprised of one second or third year and two to three interns. Interns act as the primary physician and point of contact for patients and their families. Our upper-level residents are given autonomy to run their team with guidance from our hospitalist and subspecialty faculty. Residents only have four 24-hour calls through all of residency, with none during intern year. The average intern load throughout the course of the year is five to eight patients.

Pediatric Intensive Care Unit

Upper-level residents rotate through our PICU during their second and third years of residency.

While in the PICU residents cover a variety of patients including trauma, respiratory failure, post-transplant, ECMO, etc.

Neonatal Intensive Care Units

Brenner Children's Hospital NICU offers subspecialty pediatric care including pediatric surgery, and ECMO.

At Brenner Children's Hospital, the intensive care unit and the intermediate care unit handle referrals from nurseries and NICUs across the state, offering residents a diversity of patient populations and pathology.

- 24/7 NNP/PA coverage with additional MD/DO and PA Resident coverage during daytime, in addition to medical students rotating through the NICU
- 4 teams of providers: 2 exclusively NNP/PA teams, and 2 teams composed of both residents and NNP/Pas
- On-site Level IV NICU adjacent to The Birthing Center, with immediate access to neonatologists and 69 beds (51 single patient rooms)
- Innovative palliative care program

Pediatric Emergency Room

The rapidly expanding pediatric emergency department at Brenner Children's Hospital offers our residents experience in caring for both emergencies and acute care visits.

Our pediatric emergency department carries a Level I Trauma Center designation along with the Childress Institute for Pediatric Trauma. We have more than 37,000 pediatric visits each year with a 12-14% admission rate through our 24-bed state-of-the-art ED that opened in March 2011. Our core faculty is comprised of 10 pediatric emergency department physicians, all with specific fellowship training in pediatric emergency medicine. The department also offers a fellowship in pediatric emergency medicine, taking two fellows each year.

Subspecialty Clinics

Subspecialty clinics take place daily in the pediatric outpatient clinic, with more than 25,000 visits annually.

We offer all major sub-specialties, as well as housing several multidisciplinary clinics such as Brenner FIT, Kids Eat, Cystic Fibrosis clinic, and Cleft clinic which allow families to bring their child in one day to see all their various subspecialty providers.

Newborn Nursery

The Newborn Nursery is in our brand-new Birthing Center, opened in July of 2019, with 30 private patient rooms and 2,443 deliveries in its first year.

Residents work with our general pediatrics faculty to learn all aspects of newborn care. We establish continuity with these patients and follow them as outpatients at the Downtown Health Plaza, the residents' clinic site.

Continuity Clinic and Ambulatory Pediatrics

Each house officer is assigned to the Continuity Clinic in the Downtown Health Plaza pediatric outpatient facility.

The Continuity Clinic is a high priority in our program, and residents at all levels are relieved of other duties to attend the clinic throughout the year. Once assigned to a certain clinic day, residents maintain their clinic group throughout their 3 years of residency, building close relationships with the continuity clinic faculty and other residents that share the same day.

Patients include newborns from our nursery at Wake Forest Baptist Medical Center, all the way through adolescent visits.

As dedicated pediatricians we strive to provide a medical home for our patients, especially those with chronic medical conditions. In addition to well child care, we provide follow-up visits for inpatient and emergency department discharges and acute sick visits. Approximately 60% of the patient population is Hispanic and interpreters are an integral part of our patient care team.

First Year Schedule

Rotation	Duration	Perks
Inpatient	3 months	2 golden weekends per month
Wards Nights	3 - 2 week blocks	1 night off per week
Development	1 month	4 golden weekends
NICU	1 month	2 golden weekends
Peds ED	1 month	2 golden weekends
Advocacy, Behavioral, Chronic Care	2 weeks	2 golden weekend
Mental Health	2 weeks	2 golden weekend
Elective	2 months	8 golden weekends
Ambulatory Peds	2 - 2 week blocks	2 golden weekends per 2-week block
Newborn Nursery	1 month	2 golden weekends

Second Year Schedule

Rotation	Duration	Perks
Inpatient – General	1 month	2 golden weekends, 1x24h shift
Inpatient – Multispecialty	1 month	2 golden weekends, 1x24h shift
Wards Nights	2 weeks	1 night off per week
Swing Shift	2 weeks	1 night off per week
Adolescent Medicine	1 month	4 golden weekends
NICU	1 month	2 golden weekends
Peds ED	1 month	2 golden weekend
PICU	1 month	1 golden weekend, 1 Sunday, and 1 weekday off
Elective	2.5 months	4 golden weekends per month
Ambulatory Peds	1 month	4 golden weekends
Pathway	2 months	2-4 golden weekends per month

Third Year Schedule

Rotation	Duration	Perks
Inpatient – General	1 month	2 golden weekends, 1x24h shift
Inpatient – Multispecialty	1 month	2 golden weekends, 1x24h shift
Wards Nights	2 weeks	1 night off per week
Swing Shift	2 weeks	1 night off per week
Wards Admission/Cross Cover	1 month	2 golden weekends
Newborn Nursery	2 weeks	2 golden weekends
Peds ED	1 month	2 golden weekend
PICU	1 month	1 golden weekend, 1 Sunday, and 1 weekday off
Elective	2.5 months	4 golden weekends per month
Ambulatory Peds	1 month	4 golden weekends
Individualized Pathway	3 months	2-4 golden weekends per month

Evaluation and Feedback

We want to ensure that our residents receive evaluations and feedback frequently and in a timely manner. Residents are evaluated at the conclusion of each rotation and evaluations are reviewed by program leadership on a quarterly basis. We also strive to encourage a culture of giving formative feedback throughout rotations so that residents can improve their performance continually. This is done both informally and formally through our recent partnership with the new ABP pilot program, SIMPL.

Organized Learning Opportunities

Our residents have protected time for education during multiple rotations, as outlined below. Additionally, we provide opportunities for residents to develop their own teaching skills and lead educational sessions as they advance through the program.

Overview of Conferences

Academic Half-Day (Friday, 9:15 to 1 p.m.)

This primary structured learning session series for our residency occurs within an 18-month curriculum organized and implemented by the Curriculum Oversight Committee. Most are interactive sessions focusing on clinical case studies, hands-on activities, board preparation, and primary literature review. About 2/3 of our residents have protected educational time to attend each week. The final hour of each academic half-day includes curricula in advocacy, quality improvement, residents as teachers, ethics, and wellness activities.

Noon Report (Monday - Thursday, noon – 1 p.m.)

Upper-level residents on inpatient and outpatient rotations present interesting recent cases. Residents and faculty work together through the differential and work-up of the patient, followed by a presentation on the pathophysiology and treatment of the disease in question by the presenting resident.

Downtown Health Plaza Morning Conference (Monday - Thursday, 8 to 8:30 a.m.)

Residents on a general pediatrics rotation or attending continuity clinic meet to lead interactive and case-based discussions of acute care topics related to outpatient pediatrics.

Continuity Clinic Conference (Monday - Thursday, 1 to 1:30 p.m.)

Each continuity clinic team meets weekly with their faculty preceptors to discuss topics from our case-based outpatient pediatrics curriculum.

Grand Rounds (Friday, 8 to 9 a.m.)

Open to all faculty and staff at Brenner Children's Hospital as well as community physicians, this event features outside speakers as well as those within our institution. Residents are required to present at Grand Rounds in their third year.

Chair's Conference (Friday, noon to 1 p.m.)

PGY-3 residents present the most challenging diagnostic case they encountered during their time in residency. They present the case to their co-residents and faculty, who are challenged to come up with a diagnosis. Participants discuss their thoughts aloud as they develop a differential diagnosis, request testing and procedures, and formulate treatment plans.

Code Simulations

Residents are exposed to mock codes and other simulations during their inpatient, ICU, ED, and ambulatory pediatrics months. Residents with an interest in medical education may be trained in running simulations for other learners.