

# **Clinical Pearls Cross-covering 6B Internal Medicine**

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### **Overview of the floor**

6B is a 37 bed internal medicine unit. The majority of patients on 6B are private medicine patients of Dr. Murphy/Dr. Ellison. Many of these patients are admitted directly from Dr. Murphy's office or from the nursing home. There are also additional medicine B (private) patients and some medicine A (teaching) patients.

Currently, Dr. Ellison rounds on Mondays, Wednesdays and Fridays and Dr. Murphy rounds on Tuesdays and Thursdays. There is 1 physician assistant (Rocelious Goodson) and 1 nurse practitioner (Magdalena Balan) that cover Dr. Murphy/Elison's patients during daytime hours. The PA and NP are easy to reach and many questions/issues can be handled through them. Dr. Murphy and Dr. Ellison round on alternate weekends. Currently Dr. Murphy is available on pay weekends and Dr. Ellison is available on non-pay weekends.

### **Pagers**

#### *Weekdays*

Dr. Melvin Murphy – 1857 (Tuesday, Thursday)  
Dr. Leonard Ellison – 1784 (Monday, Wednesday, Friday)  
Magdalena Balan, NP – 92541 (Monday thru Friday)  
Rocelious Goodson, PA – 9280 (Tuesday, Wednesday, Thursday)

#### *Evenings*

Medicine B On-Call – 5565 or 5588

#### *Weekends*

Dr. Murphy (pay weekends)  
Dr. Ellison (non-pay weekends)  
Rocelious Goodson (every Saturday)

### **Pharmacokinetics**

- All aminoglycoside and vancomycin dosing is handled by pharmacy, per policy.
- While pharmacy is not consulted to dose/monitor phenytoin, please follow these patients peripherally & make sure levels are checked at least weekly. If a level has not been checked in  $\geq 7$  days, please bring it to the attention of the PA or NP.

### **Anticoagulation**

- Anticoagulation is handled per pharmacy consult. Although pharmacy is consulted for many patients on anticoagulation, do not assume pharmacy is consulted. Please contact the physician or PA/NP to verify if pharmacy is to follow. If we are not consulted, please fill out a patient profile to follow peripherally.
- Make sure to verify ALL enoxaparin dosing. Many patients on 6B are elderly and have reduced renal function.