Welcome to New Orleans
Guide for Incoming 3rd Year Students

UQ-Ochsner Program
2018 Edition
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Congratulations on having completed your first two years of medical school! This is no easy feat, particularly with all that grueling prep for the USMLE Step 1. But now that is all behind you (and if it isn’t, please refer to the section devoted to the USMLE, which includes Step 2) and it is time to move on to the clinical aspects of medical education. This is what you have been working hard for and trust us when we say that all that medical knowledge you gained in your first two years will come through in surprising ways. Seeing it actually applied in real patient care is incredibly rewarding. If you have any questions or concerns during your Phase II education, the go-to email address for the Ochsner Clinical School administration is OchsnerClinicalSchool@Ochsner.org. You can also always contact the OMSA officers at OMSAPresident@Ochsner.org, OMSAAcademic@Ochsner.org, or refer to our website (perpetually under development) at http://www.ochsneromsa.org

This guide will try and focus in on a few key components to the transition. By now, you should all be pros at arranging international flights and moving house, so most of this will be skipped over. The same principles and websites as in the Brisbane Guide apply here, so you can reference that if you need.

OMSA
The Ochsner Medical Student Association (OMSA) is the representative body for UQ-Ochsner Medical Students in Australia and the United States. OMSA’s key mandate is to connect, inform, and advocate for each of the UQ-Ochsner students. OMSA advocates for UQ-Ochsner students through policy and program development and representation to faculty, staff, and the community.

Planning your transition
• **USMLE Step 1:**
  o By now you should have already decided whether you want to stay in Australia to take your Step 1 or come back early to take it in the US. This is a very personal decision and has myriad factors that you must decide on for yourself. No matter what, you will need at least 4 weeks of uninterrupted study time prior to taking the exam. And it is honestly one of the most important things for your Phase II career that you take it **before** Phase II starts. More on that later on.

• **Plan your time of arrival:** This can vary depending on your particular situation. In general, we recommend arriving 2 weeks early in order to get a place, **buy a car**, and learn your way around NoLa a bit. Folks who are locals will obviously have less need for extra time and if you have a friend in the year above you that you can crash with that is always helpful.
  o As you may have noticed, **buying a car** was in bold and italics. You absolutely need a car for your time here in NoLa. Unlike Brisbane, you cannot rely on public transportation here. Public transportation here is very limited, unreliable, and incompatible with your hours at the hospital. Carpooling is not
an option. Even if you and your roommates are on the same rotation, it is unlikely you will be on the same schedule. Your rotations will take you to hospitals and clinics all over Louisiana.

- A bicycle can come in handy, but this is not a bike friendly city. Additionally, you will have days when you need to be in the hospital at 5 AM and not finish till well into the evening. Besides being exhausted, riding around at night is dangerous because the drivers here are not accommodating to cyclists. In other words, a bike is nice and you can use it to commute from time to time, but is not a substitute for a car.

- Temporary accommodation:
  - If you have a friend or contact in the year ahead of you willing to put you up, that is often the best option.
  - You can look into a hotel or longer stay motel (typically Metairie/Kenner will be cheaper than in New Orleans proper). Please refer to the online interactive neighborhood map for more information

- For banking, it is important to note that there are no Bank of America or Wells Fargo branches anywhere in Louisiana.

- In general, the main banks here are:
  - Whitney
  - Capital One
  - First NBC Bank
  - IberiaBank
  - CitiBank
  - The most commonly used banks/ATMs around the hospital are Capital One and Whitney Bank.

- Health Insurance:
  - As a medical student of UQ-Ochsner, you are required to have health insurance.
  - Your OSHC will not cover you in the US, so you will need to get your own plan.
    - However, you cannot get rid of your OSHC since you need it for the length of your Visa and you need your Visa for your return rotation to Australia in Year 4.
    - After you graduate the unused portions of your OSHC (i.e. all the time you were not in Australia) will be refunded.
  - Ochsner has a health plan to offer students. Like most plans on the marketplace, the plan tends to have a high deductible. You will need to shop around for a plan that suits you best and use the website healthcare.gov to help guide you. The marketplace opens November 1 of each year.
  - More information will be sent to students as it becomes available from OCS – refer to www.OchsnerStudentInsurance.com
  - If you are under 26 you could be added on to your parents’ plan, which is probably your best bet if you qualify.

Weather
• The sun is not as brutal in New Orleans as it is in Brisbane. However, the summers are just as hot and the humidity is typically very high, usually above 50-60% and commonly in the 90-100% range. Rain is never far off and sudden heavy rainfall can come unexpectedly. The winter can get chilly, made more so by the humidity. Hurricane season is from July 1 to November 30.

• Summer (May - August): low of 80-85F overnight, high of 95-100F by afternoon. Very humid, frequent rain, chance of hurricanes. It can easily be 85F and 90% humidity at 6am.

• Autumn (August - November): low of 60-65F overnight, high of 80F by afternoon. Still very humid, still occasional rain. This is when the weather starts to get much nicer. There is a lot of variability, but September is often the best month for outside dining.

• Winter (November – March): low of 40-45F overnight, high of 65-70F by afternoon. The temperature rarely falls below 35 at night, or below 55 past mid morning, though it can reach freezing overnight from time to time in December. The relatively high humidity makes it feel even colder.

• Spring (March – May): low of 55-60F overnight, high of 75-80F by afternoon. The humidity creeps up and temperatures start to rise. This is also a great time of year for outside events, though it can get very warm very early in the year.

Things to bring with you

• What you can move back from Australia will largely dictate what to bring with you. Books are largely unnecessary, unless you are bringing back review books for your Step 1 study. Most apartments/rental houses are unfurnished, but there is a Costco and a Sam’s Club here that can quickly and cheaply restock much of your goods. Craigslist is also a good option for furniture and there is a second hand store called Bridge House which offers many goods for extremely cheap (you can get an entire set of dishes, cups, bowls, and silverware for less than $10)

• You will obviously need the medical equipment you already have. We would recommend, however, you hold off buying more until you start rotating through and see if you truly have a need for it. Stethoscopes and pen lights are a must-have. Neuro exam kits may come in handy, but are available to borrow through OMSA.

• Make sure to have your standard forms of government issued ID and at least a few sets of clinical dress with you available immediately. Wear clinic dress to orientation for your ID photos. Unless you are on a surgical or ICU service, you will be rounding in clinical dress.
  o For the guys, clinical dress is slacks and a button-down shirt with tie.
  o For the ladies, clinical attire is similar to Australia – closed-toe shoes, skirts and dresses at knee length, blouses and dress shirts. Nothing revealing.
○ For surgical rotations, scrubs are checked out and returned daily. Scrubs can be found in the locker rooms on campus. Please change into your scrubs on campus and change out of them at the end of the day.

○ Books: If you already have textbooks you like, you may wish to bring them. There are many reference books in the Ochsner library, and most departments have their own small libraries with useful references
  ○ There is a space in the medical library at main campus for us to have computer access with all the library resources available including access to EPIC, the electronic medical record that Ochsner uses.
    ▪ Note that the access from Ochsner is different to that of UQ. There is much overlap, but some differences
    ▪ From home, the UQ VPN is easier to use than the Ochsner library but they are working to upgrade and improve the access
    ▪ If you don’t have access to something from Ochsner try UQ and vice versa

○ You will be given two white coats during the January orientation. These are your only two coats [for free] and if you need to replace them you can pay for additional coats.
  ○ You can machine wash them, but dry cleaning does a better job. Whether the added cost is worth the better job is up to you
  ○ You must wear the white coat at all times when you are at any Ochsner location or function in a professional capacity (which is most of the time; when in doubt, white coat). You need to wear either clinical dress or Ochsner scrubs under your white coat and have your ID badge visible at all times.
    ▪ You will be given access to the scrub machines at Ochsner for your scrubs. You use your ID card to swipe and pick up clean scrubs and the same to deposit your dirty ones. You can "check out" a maximum of three sets of scrubs.
  ○ Your ID will also provide you access to restricted areas, variably depending on your rotation. We get the same 20% discount all Ochsner employees do, but you do not need to put money on the card for the discount. They accept cash and credit card.

What to do upon arrival in NoLa

○ Relax and get settled in to your temporary accommodation. If you have the energy, go out and listen to some live music and have some good local food.

○ Day after arrival
  ○ Start looking for a permanent place to live
  ○ Start looking for a car, if you don’t have one already
  ○ Get your cell phone working
    ▪ Verizon has the best coverage in and around the hospital
    ▪ T-Mobile gets the next best coverage which has recently improved, however the service gets patchy once you leave the greater Metropolitan New Orleans area.
    ▪ AT&T can be patchy
Make sure you know the dates of your white coat ceremony (Jan 6), Ochsner orientation (Jan 3-5), and start date for Rotation 1 (Jan 8, 2018)

- Orientation will be a multi-day event that is absolutely mandatory. You will have photos taken, do mandatory (but one time) health and drug screenings, be oriented to EPIC (the electronic medical records system Ochsner and many other health systems use) as well as Ochsner in general, and the last day will be an OMSA orientation where we will cover tips, pearls, professionalism, and then all adjourn to meet up later at a local establishment for drinks and socializing.

**Housing and Transportation**

- Fast and easy transportation to Ochsner Main Campus (OMC) (1514 Jefferson Hwy, Jefferson, LA 70121) is of utmost importance in the first few weeks. After that, reliable transport to other Ochsner facilities and community clinics will also be important. This is why a car is absolutely vital to your Phase II career.
- Parking for the hospital is across Jefferson Highway from the hospital, behind the Tansey Breast Center and the Academic Center. It is **Parking Lot B. Do not** park in the hospital parking garage – it is reserved for patients, and you will be ticketed with a fine. Repeated violations are reported to the clinical school faculty.

**NoLa Neighborhoods**

- New Orleans is an amazing city with great people who are very proud to be New Orleanian. The history runs deep in New Orleans with most houses being at least 50 years old and many close to or over 100 years old. There are also still scars from Katrina, both physically in the city and psychologically in its people (As a side note, many people use the hurricanes as a time reference, so know that Katrina was in 2005 and Isaac in 2012). New Orleans is also unique in that there are very few “good” **neighborhoods** but more often “good” areas or streets. You can be in a beautiful part of town with gorgeous houses and a 24 hour security patrol and be only 500 meters away from a significantly worse area with boarded up houses where you would not want to find yourself after dark. Overall the city is very safe and people are very welcoming, but it is important to be very aware of your surroundings and **always** check out a potential place to live in person and make sure to investigate the nearby areas. Many places do not offer off-street parking and so you may find yourself living in a great area but possibly parking in a bad area at night if you don’t take that into account when you sign a lease.
  - Please refer to the [online interactive map outlining the neighborhoods with comments about them](#). The map also includes points of interest from restaurants to bars to Ochsner clinical sites.
  - Most houses in NoLa are very old. It is important to ask what sorts of amenities are available. One particularly important thing to ask about is the wiring of the house. Many old houses do not have grounded outlets and you can quickly scope out if there has been an upgrade by looking at the number of prongs in the outlets. If you have an ungrounded house (which many are) you would be wise to invest in a good surge protector as at least one laptop computer has been fried from a power surge during a storm.
Many houses are either “shotguns” which means that every room is in a line; i.e. you could open the front and back doors and shoot a shotgun through to the back without hitting anything. Shotguns tend to be cheaper and work well if you are living by yourself, but can be bothersome with roommates (even if it has two bedrooms, you will have to walk through one bedroom to get to the bathroom/kitchen/living room). There are stand alone houses (like the share houses you are used to in Brisbane) but many places are duplexes or even quadplexes; old mansions turned into multifamily homes. These can be great to live in, particularly if you have a good neighbor/landlord (sometimes it is the landlord that lives in the other unit).

The rental laws here in NoLa very much favor the landlord, not you. Be careful when you sign a lease to ensure exactly what responsibilities are yours and when and how to pay your rent. The BSB and pay-anyone electronic payments you are used to in Brisbane are not as common around here and by law you can be evicted at any point from your lease for non-payment of rent by as little as 5 days, with only 1 or 2 weeks notice given.

**Other housing information**

- Furnished vs. Unfurnished apartments
  - Furnished apartments are uncommon in NoLa and generally extremely expensive. Many times the extra rent they charge for the furnishings can be as much as $3-500 per month making it much more economical to just buy your own furniture.
- Most homes are retrofit with window AC units (the wall mounted ones we see in Brisbane are not at all common). Central air is not uncommon, but is not the norm. Ceiling fans are everywhere and will be your best friend, even with AC on, during the summer.
- Documentation for signing a lease
  - The documents you had for your lease in Brisbane will cover most, if not all, of what you need.
    - Electronic and physical copy of identification(s): driver’s license, passport, bank card, student ID, etc.
    - Proof of income (ie. financial aid letter)
- Realtors
  - The main realty companies in New Orleans are Keller Williams and Latter&Blum. They can be excellent resources if you would like help in finding a place to live. In general they do not require money for their services as they get a commission from the property owner that has listed the rental property.
    - In the past students have used Todd Tedesco of Keller Williams Realty and have been very satisfied with his service. He is well aware of our program, who we are, what our general needs are, and is willing to take on Ochsner students to help them find places to rent or buy. You can reach him by text or call at his cell (504-250-9053) or by email at todtdedesco@kwrealty.com.
- Transportation
The streetcar is fun to ride, but not a particularly practical way of getting around. You should definitely go for a ride to see the houses on St. Charles and it is a good way to ensure you don’t need a designated driver.

In New Orleans, everything is at least 10-15 minutes away unless you can walk it. The streets are always falling apart, with huge potholes everywhere and the maximum speed limit anywhere in the city is 35mph (and if you are going that fast it will seem very fast to you). During rush hour transit times can be greatly exaggerated. Driving from Audubon to OMC can take 5 minutes at 5am but 20 minutes at 7:45am.

Driving in NoLa takes some getting used to, but once you figure it out and get the hang of a few major streets you will find it easy to navigate around.

Finances

- Now that you are back in the US this should be much more familiar and need less explanation. In general, the cost of living is a lot less in New Orleans than in Brisbane, though the utility costs tend to be a bit higher, particularly during the summer (depending on how much you can tolerate that southern heat).

- Very generalized budgeting
  - Rent: $500-1,000/month
  - Utilities: $125-250/month (variable based on how “green” you live and whether it is summer or not)
  - Internet: $40-60/month (split between whomever you live with)
  - Groceries: $50-$100 per person/week (if you live with a few roommates shopping at Costco and splitting the cost can save a lot of money)
  - Phone: $15-$75/month
  - Entertainment: going out at night is much cheaper than in Brisbane. Most places do not charge a cover and the drinks can be very cheap. Obviously you can spend money at expensive places, but there are plenty of happy hours with $1 beers and plenty of places that have $2 beers regularly.

- Ways to save money
  - Do not get cable TV
    - Getting a ChromeCast ($35) and a Hulu and/or Netflix subscription will cover pretty much all of your TV watching needs (except for sports, which may be important enough to you, although there are plenty of sports bars around town. If you have roommates the split cost may well be worthwhile.)
    - Satellite TV is also a less-expensive option, as a 2 year contract is viable
  - Buy in bulk from Costco or Sam’s Club and split the cost with roommates
  - Look for happy hours and special meal deals that are always ongoing in New Orleans.
  - Spend time wandering around at the free festivals, art shows, and music instead of spending money on events at venues. New Orleans has an average of 400 festivals a year, so there is always something to go to.
Invest in a fuel economical car to save money daily and on long road trips when you have the time.

Apartment complex housing tends to be more expensive than duplex houses or shotguns.

Use your Winn-Dixie rewards card to save on gas, or purchase your gas at Costco or Sam’s which is typically 30 cents cheaper than anywhere else.

**Miscellanea**

- Things to leave in Australia
  - Anything you can’t carry here conveniently or things that require a higher voltage to run.
  - Make sure and determine the cost of excess baggage/shipping to help make your decision. Many times it is cheaper to just buy new things here and try to sell what you have in Australia rather than schlep it over.

- PC vs. Mac
  - It does not matter, as long as you are comfortable with it.
  - Most of the computers in hospital and libraries are Windows, though compatibility issues are uncommon. You can access EPIC from home or tablet regardless.

- eReaders and SmartPhones: Ipad vs. tablet vs. Kindle?
  - The same concerns apply as before. However, this time, you will have much more reason to have at least a SmartPhone of some kind with you. You can access EPIC from your tablet or phone (either the full version using a Citrix XenClient or the limited version using the EPIC app; Canto for iPad and Haiku for Android).
  - Most residents and even staff communicate very regularly by text message so it is very handy to have that functionality at least.
  - References for drugs, medical calculators, antibiograms (Sanford Guide) are all very highly useful apps to have which make SmartPhones nearly a necessity for Phase II.

- USMLE
  - Step 1 should be behind you now! Congratulations and celebrate!
    - There are some legitimate reasons to put off taking the Step 1. These include repeatedly failing practice exams, personal or family health concerns, or extreme circumstances outside of your control.
    - However, one thing is without a doubt – **putting off the Step 1 in order to get a higher score is a failing proposition**. Put simply you will not have time to study for the Step 1 during Year 3. In most instances that someone has put it off they have fared worse, done no better, or fallen into a self-perpetuating spiral of continually putting off the exam. You also make yourself ineligible for any leadership position (elected or appointed) and any research at
Ochsner. We cannot stress enough how vital it is to bite the bullet and take the exam before Year 3 starts.

- If you do have to put off the test, for any reason, please contact your society head for further guidance.

  o Step 2
    - Step 2 is broken up into two parts – Clinical Knowledge (CK) and Clinical Skills (CS)
    - Either portion can be taken at any time, though it is advisable to wait until after Year 3 to take either portion.
    - The CS portion is very much like the OSCE’s you will have taken at the end of Year 2. There is very little that needs to be done in direct preparation for it, and most of your “study” for the exam will be relegated to understanding the format and what is expected of you. One thing UQ prepares us really well for is clinical interaction and between that and going through your rotations at Ochsner you should be very well prepared to take the CS at the end of Year 3. Unless you found yourself struggling significantly with your exam and patient interaction skills, it is not at all unreasonable to take the CS between Years 3 and 4.
      - The CS is only offered in 5 cities: Houston, Chicago, Philadelphia, Atlanta, and Los Angeles. You can use the exam as an excuse for a trip home if you live near one of those cities or on your way to or from your return rotation in Australia during Year 4. Some people may also carpool to Houston or Atlanta to take the exam. In any case, plan accordingly.
      - **Make sure and schedule and take your CS earlier rather than later.** The spots fill up very quickly at all times of the year and results can take a long time to come back. It is a simple enough exam that you don’t want to get stuck waiting for results.
      - Also remember that the CS is now accepted as equivalent to the Year 4 OSCE exam, both of which are components of MEDI4030 which is required for graduation. If you do not take the CS in time, you will have to fly back to Brisbane in order to take the OSCE’s there and graduate since Ochsner does not offer the Year 4 OSCE’s.

    - The CK is a multiple choice exam similar to the Step 1, but more clinically focused. Preparing for your third year shelf exams and working through UWorld (provided) will be integral to your success. The CK is dependent much more on your clinical knowledge, so it is integral that you participate as much as possible in each clerkship. If you are feeling particularly strong and are willing to devote a couple of weeks to study, it is not unreasonable to take this exam between Years 3 and 4. Most people, however, take it after Rotation 2 or 3 of Year 4 to allow some more time for study and clinical preparation. Bear in mind though, that since so much of the exam is built on the foundations of clinical medicine you learned in Year 3 there can be a
trade off where that knowledge becomes less fresh in your mind. Optimal timing will depend on both yourself and the rotation order you end up with in Year 4. You can always discuss this with people who have already taken the CK for more personalized guidance.

- The CK is significantly easier than the Step 1. The old adage is “two months for Step 1, two weeks for Step 2, a #2 pencil for Step 3.” While it may not be quite that easy, your clinical education at Ochsner will prepare you very well for the exam.
- While not technically necessary for residency applications, it is very much in your best interest to have your CK score back in time for your applications. With that in mind, the latest you should take the exam is shortly after Rotation 3 of Year 4.

- Refer to the USMLE Study Support website (https://medicine-program.uq.edu.au/ochsner-students/usmle-study-support)

- Typical rotation schedule
  - In short, there is no such thing. Each rotation will be different, each service within each rotation will be different, and the same service will be different from week to week and even day to day depending on your attending, resident, and patient flow.
  - In general the surgical services are the busiest and start the earliest. The outpatient clinics are typically less strenuous and have more predictable hours. You are expected to (and should want to – this is how you learn!) be part of the team, which means that if an emergency surgery comes in just as you are about to leave at 7pm after you’ve already been there for 13 hours you may well need to stay.
  - Whether your attendings/residents say anything about it or not your attitude, work ethic, and how much of a team player you are will be noticed. And it will be talked about behind your back (whether good or bad). Since many times whether you pass or fail depends on subjective evaluations, this can really matter. And even if you manage to make it through, your Medical Student Performance Evaluation (MSPE or Dean’s Letter) for your residency applications is largely based on the evaluations and comments about you during your rotations. It is in your best interest, in every sense imaginable, to make yourself an asset to the team.
  - Sometimes this may mean “scut” work or just standing around wasting your time. A little bit of this is unavoidable and may be worse with some residents or attendings. In general though, Ochsner physicians are really quite good at understanding when your time is being wasted and cut you loose. A good strategy is to say up front that you are willing to stay as long as it takes to learn, help patients, and help out the team but that you would like to leave so you can read and study at other times.

- However tempting it may be do not make up “lectures” you have to go to in order to leave service. Most of the time you can get away with it, but besides being unethical, the attendings know that not every time is legit and if you get caught there will likely be heavy consequences.
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