



# UCSF Department of Medicine ZUCKERBERG SAN FRANCISCO GENERAL

## CULTIVATING THE QUINTESSENTIAL PHYSICIAN: THE BRIDGES COACHES PROGRAM

### Beyond Classrooms and Textbooks

Becoming a physician is an exciting, challenging odyssey, and the UCSF School of Medicine's [Bridges Curriculum](#) has a longitudinal coaching program that helps medical students develop the professional and personal skills essential for becoming a doctor.

"As a coach, I get to see students grow from the day they step onto campus all the way through medical school graduation," said **Binh An Phan, MD, Professor of Medicine in the ZSFG Division of Cardiology** and one of nine ZSFG Department of Medicine faculty members who serve as Bridges coaches.

Now in its fourth year, the Bridges coaching program engages clinician-educators who spend a full day each week with six medical students for their first year and a half of medical school, followed by periodic meetings during their clinical years. The program provides a supportive environment to learn about complex, nuanced topics over time, including clinical skill development, health systems improvement, and professional identity formation.

For example, coaches teach students how to conduct a physical exam, interview patients, and communicate effectively. In pre-COVID times they might have spent the morning at the Kanbar Center for Simulation and Clinical Skills working with standardized patients, and the afternoon in the hospital or clinic; during the pandemic, most of the meetings are now virtual.

"Becoming a physician is a complicated, multifaceted process that requires support beyond what you can learn from a textbook," said Dr. Phan. "Beyond just diagnosing and treating a patient, what's the appropriate way to introduce yourself



ZSFG Department of Medicine Bridges Coaches: Sarah Goglin, MD; Lawrence Haber, MD; Elizabeth Imbert, MD, MPH; Mary Margaretten MD; Marlene Martin, MD; Meghan O'Brien, MD; Gabe Ortiz, MD, PhD; Binh An Phan, MD; Vanessa Thompson, MD

when meeting them for the first time? How do you show compassion? One of the greatest aspects of the coaching program is helping students develop amazing communication skills. There's a lot of data showing that improving the physician-patient relationship not only makes the patient feel better, but may improve their health care."

### Learning to Better Health Systems

Coaches also lead students through health systems improvement projects from the start. "We teach students about the physiology and pathophysiology of the health care system, and give them a parallel understanding of how two very complex systems work – the human body and health care systems," said Bridges coach **Lawrence Haber, MD, Associate Professor in the ZSFG Division of Hospital Medicine**. "It's an early immersion in quality improvement and patient safety."

Some of Dr. Haber's students worked on a project

to identify hospitalized patients who could benefit from pre-exposure prophylaxis (PrEP) to prevent HIV infection. They counseled patients on how PrEP could help and encouraged inpatient teams to prescribe it on discharge or refer patients to ZSFG Ward 86. "Hospitalized patients are with us all day, often for a number of days," said Dr. Haber. "We can do things in one day that could take an outpatient provider weeks or months to do. With the Bridges program, I can take six really interested students who are excited about becoming physicians, and have the time and interest to work on a project that might not otherwise come to fruition."

"One of the mandates of these health systems improvement projects is that students are not just sitting in a windowless room crunching numbers," said Dr. Haber. "They're engaging with patients as well as patient care coordinators, social workers, residents, and others. I would love for us to have

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successful projects, but at the end of the day my goal is for them to learn quality and safety skills, meet other members of the health care team, and see how everyone works together in the hospital.”

Dr. Haber also led students in a project to increase the number of discharged patients who are given naloxone nasal spray, which can reverse opioid overdose. As part of this project, students wrote, starred in, and produced an educational video which doctors, nurses, and pharmacists can play for patients via ZSFG’s in-hospital video system to explain what naloxone is and how it is used.

In addition, Dr. Haber is working with other students to encourage hospitalists to replace jargon-filled discharge summaries with clear, simple descriptions that are written at a sixth to seventh-grade reading level, as recommended by the American Medical Association.

Another ZSFG Bridges coach, **Sarah Goglin, MD, Assistant Professor in the ZSFG Division of Rheumatology**, has helped her students improve medication safety. One group of students reviewed hydroxychloroquine dosing guidelines for lupus. “It’s a very safe medication, but it can have retinal toxicity which can increase over time and in relation to the dosage,” she said. Dr. Goglin helped students develop systems to recommend appropriate dosage, refer patients for annual retinal exams to detect any changes before their vision is affected, and ensure patients attend those appointments. Students were invited to present a poster about their work at the American College of Rheumatology.

Dr. Goglin also worked with students to create a systematic approach to help ensure safe immunosuppressant prescription in the ZSFG infusion center. “Before the Epic rollout, all orders were on paper,” she said. “There wasn’t a robust use of templates, and there was a high risk for errors. They developed a safety checklist to screen for hepatitis B, hepatitis C, HIV, TB, and pregnancy, and these standard order templates became the basis for order sets in Epic once that was rolled out.”

Dr. Phan’s cohort focused on improving the patient experience when transitioning from hospitalization to home. This included ways to better educate patients about their disease during

hospitalization, and incorporating patients’ preferences about their post-hospitalization care, such as how they want to receive medications. “The students did a great job of interviewing patients and staff, and came up with ways to improve patient education,” he said. “For example, they created patient education material to help patients feel more knowledgeable and empowered.... Students can be vital members of health systems, even very early on. I hope my colleagues will consider ways to incorporate them to improve what we do.”

### From Start to Finish

Coaches also help students with professional development. “Many students in my first cohort are working on residency applications,” said Dr. Goglin. “I help review their personal statements, and recently met with someone who is still on the fence about his specialty choice. When I was a medical student, I would have loved to have somebody know me as well as I know many of my students.”

“During their third and fourth year, we meet every couple of months and talk about things like how to prepare for board examinations,” said Dr. Phan. Occasionally, coaches meet individually with students to discuss summer research projects and individualized aspects of career development.

“I love that students can call, email, or text me about almost anything, and feel like I’m a supportive person in their lives,” said Dr. Phan. “They have someone to talk with about difficult things that they may not feel comfortable discussing with a random faculty member. Several times students have contacted me when issues have come up during a rotation with an attending or resident. Hopefully I can be a coach for life.”

Coaches also learn from their students, and the trust that develops can often support deeper discussions. Health equity and diversity, equity, and inclusion are woven throughout the Bridges curriculum. “It was eye-opening to participate in these discussions, especially this spring when everything came to a head with Black Lives Matter and centuries of racism,” said Dr. Goglin. “There was a level of honesty that I hadn’t had with students in the past, and I learned an incredible amount from them.” These conversations helped inform her work as Associate Program Director

for the UCSF Rheumatology Fellowship and Assistant Program Director for the UCSF Medicine Residency. “They helped me see the need for holistic review of applications and faculty training about microaggressions,” she said.

“Having the School of Medicine step up to provide salary support for the faculty to participate in this program is huge,” said Dr. Goglin. “It’s so time-intensive that there’s no way it could happen otherwise. It’s wonderful to nurture these relationships over students’ four or five years of medical school.... As a Bridges coach, my role is much broader than the specific, focused career or project mentoring I do with residents or fellows. We get to develop deep relationships with medical students in a way that most faculty don’t when they only work with them on a short rotation.”

“Medical students rank the coaching program as one of the most valued and meaningful parts of the Bridges curriculum,” said Dr. Phan. “I’m very honored to be part of it.”

“It’s amazing to witness the arc of students’ professional development, from someone who recently got out of college to the cusp of being a physician,” said Dr. Haber. “It’s a privilege to help them become the best version of a physician they can be.”

Elizabeth Chur

Editors: Neil Powe, Laurae Pearson, Brooks Bigart

## SPOTLIGHT

### Faculty Awards and Honors

**Eric Goosby, MD**, Division of HIV-Infectious Diseases-Global Medicine, was appointed by President-elect Biden and Vice President-elect Harris to the [Transition COVID-19 Advisory Board](#).

**Philip Hopewell, MD**, Division of Pulmonary and Critical Care Medicine, received The Union Award from the International Union Against Tuberculosis and Lung Disease.

The San Francisco Health Commission honored all ZSFG Hospital Staff Members in its [Nov. 17 meeting](#). 2020 Health Commission Employee Recognition awards given included the Infection Control team including **Lisa Winston, MD** and **Vivek Jain, MD**; Critical Care including **Antonio Gomez, MD**; and the Occupational Health Services Covid Response Team including **Jessica Chuang, MD**.

**Marlene Martin, MD**, Division of Hospital Medicine, was awarded a fellowship with the California Health Care Foundation’s [Health Care Leadership Program](#).

**Neil Powe, MD, MPH, MBA**, Chief of ZSFG Department of Medicine, was awarded the [John Phillips Memorial Award for Outstanding Work in Clinical Medicine](#) by the American College of Physicians.

