

# THE INSIDE SCOPE

## IMPORTANT DATES

### February

2/20: New Rotation Starts  
President's Day

### March

3/05: Preferences Open  
Department Evals Due  
3/12: Daylight Saving Time  
3/15: CE Staff Apps Open  
3/26: CE Staff Apps Due

### April

4/08: CE Staff Interviews

### May

5/01: DCA Applications Open  
5/04: Last Day of the Rotation



## A Message From Program Management

Dear Care Extenders,

We'd like to extend a warm welcome to all of our Care Extenders. Thank you for choosing to dedicate your time and energy to helping others in our community. Your generosity and compassion will make a positive impact on the lives of many, and we are grateful for your support. As a Care Extender, you are part of a team of volunteers who provide a variety of services and support to those in need. Whether you are assisting patients, families, or staff, your contributions are invaluable and greatly appreciated. We recognize that volunteering can be a demanding role, but it is also a rewarding one. Your commitment to making a difference in the lives of others is an inspiration to us all, and we look forward to working alongside you to create positive change in our community.

Thank you again for your dedication to our organization, and we are thrilled to have you as part of our team.

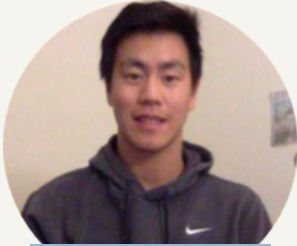
Sincerely,

Silva Thomas & Osanna Tosunyan



# Care Extenders of the Rotation!

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**Samuel Jo**  
RRH-8 East



**Florence Larssonneur**  
RRH-Bowyer Clinic



**Jeffery Fenn**  
RRH-Postpartum



**Gabrielle Magat**  
RRH-7 East



**Kayla Murray**  
SMH- Labor and Delivery



**Steven Pham**  
RRH-IR



**Kyle Scranton**  
RRH-5 ICU



**Isabella Eklund**  
RRH-Surgery Center



**John Antowan**  
RRH-7 West CTU



**Faten Safadi**  
RRH-ER A



**Lily Do**  
SMH-Postpartum



**Hannah Romeo**  
RRH-Pediatrics A

# Advice from CEs of the Rotation

"Move out of your comfort zone. At first it may be intimidating to go into an environment that seems unfamiliar; however, if you are proactive in asking to assist ask nurses/care partners, it will become a very rewarding experience." -Samuel Jo

"As a Care Extender you are a part of the department team! Get to know the staff and don't be afraid to ask questions!" -  
Isabelle Eklund

"Don't be afraid to put yourself out there. Make an effort to talk to those you're working with: ask questions, seek career advice, or just check in with those around you!" -Kayla Murray

"Regardless of what you do on the floor, your support as a Care Extender matters. Even if you may be doing something as simple as restocking an isolation cart, it gives the staff one less thing to worry about" -John Antowan

"Become friends with the nurses - learn their names and get to know them because they know a lot and can show you some cool procedures." -Hannah Romeo

# The CE Perspective

**Q: How long have you been a Care Extender and what department are you currently in?**

**A:** I joined my freshman year. Currently, I just graduated from UCLA. So it's been a bit more than four years. Of course, with COVID, things were on pause. I'm in the ED, my favorite department.



**Q: What has been a particular shift/event that has been memorable to you?**

**A:** This was right before COVID hit and got worse, but I volunteered in the department with liver patients in critical condition. I got to know the family for this really critical patient who was on his deathbed. They kept on believing in the system, and just being really supportive and having a lot of hope. And that changed how I looked at medicine. (Medicine is) not just looking at the patient's condition but also the patient's holistic well being, including their family and what they want in their last few moments.

**Q: What are some skills the Care Extender Program has helped you develop?**

**A:** I definitely learned patient interaction skills and communication. I learned to demonstrate compassion by helping patients feel like they're being listened to and appreciated. You have no idea how giving someone a warm blanket can make them so happy, especially in the ER. Also, I learned to be very proactive; in the ER, there's many physicians who are all really willing to teach and really knowledgeable. I realized the value of taking the initiative to go up to them and seeing if there's anything you can learn from them from shadowing or asking them questions about patients.

**Q: How has the Care Extender Program changed your view of healthcare?**

**A:** I love reconstructive surgery, which I found outside the CE program. But the CE program has been really invaluable in allowing me to explore other specialties outside of that. For example, the

emergency department. It's a completely different field. It requires a lot of problem solving, critical thinking and knowing about different medical conditions. So that's been really interesting to me.

**Q: Why have you chosen to stay with the Care Extender Program?**

**A:** Currently, I'm in my gap year where I'm working full time in a reconstructive surgery lab seeing patients in the surgical clinic. Care extenders is keeping me rooted to the other sides of the medical field.

**Q: How has Care Extenders helped you towards your future goals?**

**A:** In undergrad, you're giving yourself the foundation for the academic learning required to become a good physician. But then, you also need a bunch of other things, soft skills, and the Care Extender Program gives you this opportunity and the setting where you can really develop those skills. And so, in Care Extenders, you're interacting with a bunch of different people, really working on how to communicate your ideas, how to introduce yourself, and connecting with people in a short amount of time. And so I thought that was particularly valuable because in med school, they just throw you into clinical rotations.

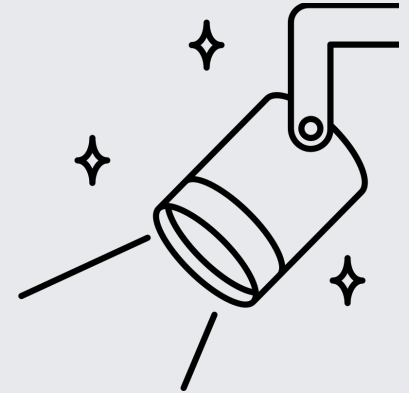
**Q: Do you have any department recommendations?**

**A:** I have two. One is the emergency department. The other is the surgery center because you get to see patients pre op, post op and sometimes even get to shadow inside the operating room. And as someone who loves surgery so much, I feel that it's a really rare opportunity to actually be able to go into the OR at such an early stage. The people who work there are also so nice and so willing to teach people.

**Kelly Huang is a Care Extender who graduated from UCLA in 2022.**



# CAREER SPOTLIGHT: PHYSICIAN ASSISTANTS/ ASSOCIATES (PA)



## OVERVIEW OF THE JOB

A physician assistant/physician associate is a licensed clinician who generally practices medicine under the supervision of a physician. PAs can practice within a variety of specialties, such as primary care and surgery. While the duties of physician associates vary by state, they may include tasks such as assisting in surgery and prescribing medication.

## HISTORY

The first physician assistant program was created to address a lack of primary care physicians within the United States, especially in poorer and rural areas. The first PAs graduated in 1967 and was composed of army veterans who had received medical training during their service. Soon after, federal acceptance of the program was achieved, and eventually, all fifty states allowed for PAs to practice within their borders.

## EDUCATION AND CERTIFICATION

Prospective PAs must obtain a bachelor's degree, usually one with a science emphasis. After college, they apply to and enroll in a PA program accredited by the Accreditation Review Commission on Education for the Physician Assistant. To become licensed to practice, graduates must pass the Physician Assistant National Certifying Examination.

## STATE OF THE FIELD

There are currently more than 100,000 physician associates working in the United States according to the Bureau of Labor Statistics. The field is expected to grow about 28% within the next ten years.

# Physician Assistant Q&A



*Jin Sun Choi is a PA with the neurosurgery department at Santa Monica Hospital.*

**How long have you been a Physician Assistant?**

I graduated in 2003. Initially I wanted to go into OB GYN, and I was working in community family planning office practices. Then, one of my friends was working down at UCI in neurosurgery said there was an opening. I felt like I wanted to go into like more of an academic environment again, in a hospital environment to see what it's like and then it stuck. Then I transferred to UCLA and I've been here ever since 2007.

**What kind of education and training did you go through to become a PA?**

First I applied to PA schools. Because I didn't know I wanted to be a PA when I was doing my undergrad, I did have to take additional courses. For example, I went to USC, and one of their requirements at the time was to know Spanish. And then PA schools require a certain amount of experience. I had to wait another like year and a half because I needed to work somewhere to get experience.

**Why did you choose this profession?**

It was the fact that I could do all the things that I wanted to do if I went to med school, which is like see your patients, know how to diagnose them, be able to offer treatments and prescribe stuff, without having to give up so much of my life. I think it was just the best choice ever.

**How do your duties differ from other professionals, like doctors?**

It feels like I really help to bridge that gap

between a patient and their doctor. I am allowed more time with the patient. I get to have the time to weed out and work through some complicated story. Another thing that's unique with PAs is that these other professions have to choose this specialty that they're going to go into. Physician assistants get to come out with general primary care knowledge and then you can go into any specialty, and they train you on the job.

**Are there any aspects of the profession that you really enjoy?**

I love that I can ask questions. I feel like I'm constantly learning since I'm surrounded by people. The doctors that I work with are happy to teach me and show me new things; all I have to do is show interest.

**What motivates you to continue working in this profession?**

I think that for everyone in the medical field, we're doing it because we want to be able to help a person who is in their most vulnerable state. Sometimes you don't know why a patient is the way they are so that's very mentally stimulating. My days are very different. Like some days I'm just kind of assisting in the OR all day. Other days, I have my own procedures on the floor. Other days, I'm just like going to the ED and seeing consults.

**Are there any challenges you've had to overcome in your PA journey?**

For sure. People sometimes mistakenly will think I'm a nurse or that I am a doctor. So I'm always having to educate people. And it's not just patients. Sometimes it's other people in the medical field that I'm having to educate. **What advice do you have for those looking to become a PA or who want to learn more about the career?**

Shadowing is great for anyone who's interested just so that they can get an idea of the scope of the practices that they're able to do. I would also not recommend going into the profession just because they didn't get into medical school because you just won't be happy.



# What's new at UCLA Health?

## Diesel Exhaust and Zebrafish – Connections to Parkinson's

UCLA health researchers have published a study examining the effects of diesel exhaust on the neurons in zebrafish. The results gave the researchers insight into how these emissions may contribute to increased risk of dementia and Parkinson's disease by decreasing expression of genes associated with the destruction of abnormal proteins.

Recently, air pollution has begun to be recognized as a risk factor for Parkinson's; research has shown that air pollution is associated with a higher risk for both Parkinson's and dementia. However, there's little known about its exact mechanism to help determine causation. As a result, the scientists behind the paper studied the effects of exposing diesel exhaust to zebrafish to see if such exposure could cause neurodegeneration. "Causality is important because not every association necessarily means it causes the disease," said Dr. Jeff Bronstein, professor of neurology at UCLA Health and co-author of the study.

Diesel exhaust was used because it is one of the major toxic pollutants in the air. While there are other pollutants, like car exhaust, they share some commonalities, most of which are found in diesel exhaust. Consequently, though diesel exhaust is not a perfect representation of air pollution, it is the closest substitute.

In order to carry out the study, the scientists exposed zebrafish that were genetically modified to express fluorescent proteins to the toxins found in diesel exhaust. Because zebrafish are transparent when they're young, the scientists were able to see a fully formed

nervous system in the zebrafish three days after hatching. By comparing the fluorescence of the different treatment groups, they were able to characterize any neuron loss that may have occurred due to diesel toxin exposure.

The scientists found that when they sequenced individual neurons of zebrafish exposed to diesel toxins, there showed decreased expression of the genes necessary for autophagy, the breaking down of abnormally folded proteins. These results expanded on a previous study, also published by some of the paper at hand's authors; that study showed diesel exhaust caused neurons to die by interfering with autophagy, though the scientists were unsure about the mechanism that caused this.

The study also found that inflammation was not necessary for neurodegeneration. When the researchers got rid of all inflammatory cells, the toxins in diesel exhaust still caused neuron death. In fact, the researchers actually found that some of the inflammatory cells in the brain actually had a protective effect while others had a damaging effect.

This is an important result because many treatments against Parkinson's attempt to non-discriminately stop inflammation; however, these results suggest that therapies should instead try to target harmful inflammation and promote helpful inflammation. Overall, the



study adds to the collection of evidence that indicates the relationship between air pollution and increased Parkinson's risk is causal.

"It does take a lot of pieces of evidence to come to the conclusion that the increased risk of getting dementia and Parkinson's is higher in people exposed to air pollution, but to say this is actually causal really takes a lot of varying studies," Bronstein said.

The study's results also have implications for guiding potential therapies against Parkinson's; the findings suggest that altering inflammation to be more protective or improving autophagy may be effective.

In the future, the researchers plan on doing knockdown studies on genes overexpressed in diesel exhaust-exposed zebrafish. By doing this, they will be able to see if levels of neurodegeneration change in response to the

altering of these genes- this allows researchers a deeper insight into which specific genes are involved in the relationship between Parkinson's and air pollution.

In addition, the researchers also plan on trying to reproduce the main results in other animals, like mice. While zebrafish are a good model, their exposure to diesel exhaust in the experiment varies from humans in two important ways. First, they breathe the toxins in through their gills and not lungs; secondly, this kind of experiment can only be done on young transparent zebrafish, but Parkinson's usually develops in older adults.

"It's nice to be able to confirm the highlights of these results in rodents, giving us a little more confidence that we can extrapolate these results to people," Bronstein said.



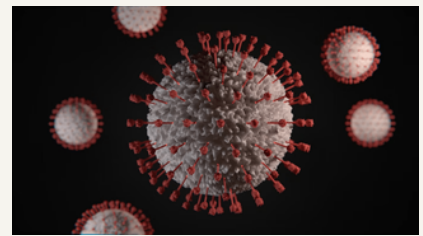
## In the News

### New COVID Variant Raises Concerns

A new highly-transmissible COVID variant has been sweeping the United States, accounting for forty-three percent of COVID-19 cases in the nation as of January 14th, according to the John Hopkins Coronavirus Research Center.

Named XBB.1.5, the variant derives from the XBB strain of SARS-CoV-2, which is related to the Omicron variant that previously caused a surge in cases last winter. It has also been given the unofficial moniker of "kraken" by some scientists.

XBB.1.5 has the ability to make it harder for the immune system to detect it, like its parent strain; however, unlike XBB, XBB.1.5 also retains high infectivity, making it the most transmissible Omicron subvariant.




The symptoms of XBB.1.5 are the same as general COVID-19 symptoms, such as cough and fever. There is currently no evidence indicating that XBB.1.5 causes symptoms that are more severe than those of preceding Omicron subvariants.

Studies have also suggested that in the face of this new variant, the current bivalent vaccines are still helpful in preventing severe COVID, though their effectiveness may not be as high when preventing disease.

To protect oneself from the disease, standard COVID precautions, such as indoor masking and handwashing, should still be observed.




# Healthcare Resume Tips



If appropriate, have a separate section for clinical experience (shadowing, volunteering, jobs). This can help your healthcare-related experiences stand out from the rest of your activities.

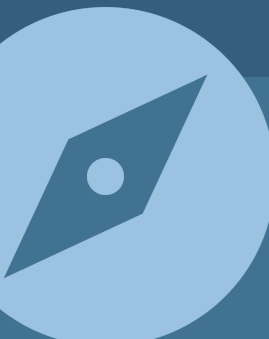
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Highlight a combination of your soft, hard and technical skills that are backed up by your activities. While skills like software and lab competencies are important, healthcare schools and employers also look for other skills, like interpersonal communication, which are important in these settings.

3




Don't be afraid to include experiences that aren't necessarily healthcare related if they were important experiences and taught you something! For example, a you could mention that a retail job gave you communication skills and the ability to multi-task.

4



Include certifications that align with the skills/themes you want to showcase. Only include ones that reinforce what's already on your resume. For example, if you want to showcase your passion for behavioral analysis when applying to a clinical social work master's program, you might consider putting a registered behavior technician certification if you have one.

5



Note any research publications you may have, especially if applying to a research-focused school/career or if the research is in an area related to your goals. They can be put in a separate research section or under an existing experience section, depending on how much you want to highlight them.



## HOW TO MAKE AN ATS-FRIENDLY RESUME

**What is ATS?**

An application tracking system is a software program that reads over resumes for employers. First, it scans for certain keywords and qualifications. Afterwards, it generates a list of the most-qualified applicants to give to the recruiter. Here are some ways to make sure your resumes make it through a to a real person!

**NEXT** **1. Use keywords from the job posting**

ATS often scans for certain traits and experiences to determine suitability. Consequently, it's important to look for mentioned job-related skills in postings and to integrate them naturally into your resume. For example, if a listing mentions organizational skills, it might be a good idea to include that in your resume.

**NEXT** **2. Make sure your formatting is ATS-compatible**

Ensure that your resume uses basic fonts and headers. Simple fonts like Times New Roman and headings like "Work Experience" will allow for ATS to analyze your resume properly.

**NEXT** **3. Avoid graphics and charts**

ATS doesn't have the ability to read more complex displays of information. While they may make your resume look nicer, you run the risk of ATS not scanning important information and throwing out your resume.

**NEXT** **4. Double-check the allowed file types for the job listing**

Some ATS systems are unable to read PDF files. Always make sure to check the posting to see if you need to send your resume in a specific format, like doc/docx.

**DONE**