

# IMMC R1 Gastroenterology Inpatient Service

## I. Introduction

- A. Staff: Ramon Reyes, MD (rotation director) and Joel Hade, MD, Charles Larson, MD, John Hines, DO, Tamas Otrok, MD, Laura Dakovich, DO, and Justin Rice, MD
- B. Duration: Four weeks
- C. Day One: Prior to the start of rotation find out from the intern on service the previous month what patients are on service and where/when to meet the attending physician on the first day.

## II. Goals and Objectives

- A. Improve skills in history taking and physical examination with emphasis on gastrointestinal and hepatic disorders.
- B. Improve ability to present a concise history and physical. Read pertinent imaging techniques that are related to GI.
- C. Demonstrate ability to apply A and B in formulating a care plan.
- D. Progress in fund of knowledge referable to GI and hepatic physiology and pathology and applicable treatments.
- E. Demonstrate progress in physician / patient interaction and rapport.
- F. Work effectively within a “team” through positive personal interactions.
- G. Demonstrate self-motivation and personal initiative to move beyond the “student” mold and progress toward more self-reliance.
- H. Begin gaining procedural skills if and when applicable.

## III. Competency-Specific Learning Objectives

### Patient Care

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

- Be able to perform a history and physical examination accurately and completely, and present the patient in an organized and clear fashion

- Formulate a working differential diagnosis based on findings in the history, physical exam and lab work.
- Recommend a treatment/management plan based on a specific diagnosis/diagnoses.
- Interact with patients in a professional and caring way as a specialist/consultant.

### **Medical Knowledge**

Residents must demonstrate knowledge about established and evolving biomedical, clinical, and epidemiological sciences and the application of this knowledge to patient care. Residents are expected to:

- Review basic anatomic, physiologic and pathologic principles necessary for diagnosing and treating GI diseases.
- Access current and pertinent medical information in gastrointestinal diseases.
- Demonstrate understanding of the basics of gastrointestinal pharmacologic agents and gastrointestinal endoscopic procedures.

### **Practice-Based Learning & Improvement**

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:

- Be able to identify gaps in knowledge related to GI disease and formulate a strategy to overcome those deficiencies
- Demonstrate the ability to search the literature using electronic resources in order to answer clinical questions in a real time fashion
- Learn the importance of feedback and positively respond to constructive feedback.
- Demonstrate knowledge of, and the ability to adhere to, nationally recognized guidelines

### **Interpersonal and Communication Skills**

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange with patients, families and professional associates. Residents are expected to:

- Demonstrate effective communication skills with patients and their families.
- Demonstrate accurate, timely and complete record keeping

### **Professionalism**

Residents must demonstrate a commitment to carry out professional responsibilities, adhere to ethical principles, and demonstrate sensitivity in caring for a diverse patient population. Residents are expected to:

- Exhibit confident but respectful demeanor to patients and their families.
- Exhibit “team effort” and good working relationship with other specialists.
- Respect patient confidentiality and the necessity to get informed consent.

### **Systems-Based Practice**

Residents must demonstrate an awareness of, and responsiveness to, the larger context and system of health care and the ability to effectively call on system resources to provide optimal care of patients. Residents are expected to:

- Demonstrate the ability to make cost-effective decisions in formulating a diagnostic and/or therapeutic plan, while continuing to provide the highest quality care
- Know how to provide efficient and effective care for patients on the GI service, and assist in any transitions of care
- Demonstrate the ability to act as an advocate for the patient in a complex health care delivery system

## **V. Description of Rotation**

### **A. Teaching Methods**

1. Ward rounds: Contact with patients from admission to discharge, and daily discussion with staff.
2. Didactic sessions: During ward rounds and other selected times topics will be discussed with emphasis on patients currently on-service.
3. Reading materials:
  - a. Harrison’s Textbook of Internal Medicine: Read and review the GI / Hepatology section.
  - b. Additional reference articles will be provided pertinent to patient problems encountered during the month.
  - c. MKSAP, GI section

### **B. Patient Care**

1. Patient Population:
  - a. GI patients: frequently encountered problems including GI bleeding, blood loss anemia, PUD, abdominal pain, IBD, GI malignancies and diarrhea.
  - b. Hepatology patients: Cirrhosis and its complications and hepatitis are commonly seen.
  - c. HIV/AIDS patients: understand GI manifestations of HIV/AIDS.
2. Responsibilities:

- a. Maximum patients: 10
- b. Maximum daily admission: 5
- c. Weekends: The resident will have 1 day out of seven free of all clinical responsibilities as required by the residency program.
- d. Patient care: The resident will see and write progress notes daily on each patient on-service unless otherwise arranged with the staff. Likewise, the resident will work-up all admissions and pick up all patients from the previous night unless otherwise arranged. Finally, the resident will see selected patients referred for GI consultation as directed by the attending staff physician.
- e. Medical records:
  - 1) Write daily notes and admission notes.
  - 2) Complete all new consultations and discharge summaries (be sure to send copy to all concerned parties including local physician).
  - 3) Sign all notes, orders, and dictated material.

## **V. Mechanics**

### **A. Time Schedule**

1. 6:30 am: Arrive on ward and attend formal sign-in/sign-out.
2. 7:00 - 10:30 am: Update from events of night, see patients, obtain and review pertinent info (vitals, labs, x-ray and path reports, etc.), formulate days plans, write notes if time and observe endoscopic procedures on assigned patients. **GET PREPARED FOR ROUNDS!**
3. 10:30 - 12:00 pm: Attending rounds and teaching time.
4. 12:00 - 1:00 pm: Noon conference.
5. 1:00 - 4:30 pm: Notes, admissions, procedures, following x-rays, etc. If any free time read about clinical problems of patients on service. Be sure all work and patient care is completed before leaving for the day.
6. 3:00 pm (approx): Wrap up ward work with staff and have didactic lectures on selected days.
7. The resident may leave at 5:30 p.m. on weekdays after patients have been checked out to the resident on call for that night.

## **VI. Evaluation**

At the end of the rotation, the resident will be evaluated by the supervising faculty. Personal feedback will be provided and an electronic evaluation form will be completed and returned to the residency office. The evaluation form will be reviewed and signed by the resident.

The resident will be evaluated by faculty in each of the required six general competency areas as follows:

1. **Patient Care:**
  - a. Demonstrate ability to effectively evaluate and manage patients with gastroenterology conditions
  - b. Demonstrate competence with procedures encountered during the rotation, especially GI procedures such as paracentesis and flexible sigmoidoscopy that may be performed
2. **Medical Knowledge:** Demonstrate ability to access and critically evaluate current medical information relevant to gastroenterology and demonstrate understanding of all assigned reading materials.
3. **Practice-Based Learning:** Demonstrate ability to identify gaps in knowledge and skills in the care of patients with common GI conditions and demonstrate real-time strategies to address these gaps.
4. **Interpersonal and Communication Skills:** Demonstrate adequate communication abilities in dealings with patients and families. Demonstrate timely and complete medical records, including admission notes, daily progress notes and discharge summaries.
5. **Professionalism:** Demonstrate respectful behavior towards patients and families, colleagues, nurses and other allied health personnel. Always protect patient confidentiality and provide informed consent.
6. **Systems-Based Practice:** Demonstrate an evidence-based, cost-conscious approach to patient care. Collaborate with nursing, social services and other allied health care providers to assure timely, comprehensive care provided.

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